

Lymphoma of the Nasal Cavity: Case Reports

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ABSTRACT

There is considerable interest in lymphomas of the nasal cavity. Two papers were written on them from China. Others came in alphabetical order from Greece, Iran, Israel, Japan, Malaysia, UK and USA. Therefore, this paper concerns the Nigerian scene with special reference to the Ibo ethnic group. Two cases are deemed to be worthy of documentation.

Keywords: Lymphoma, Nasal cavity, Ibos, Nigeria

INTRODUCTION

From China, two papers were written on lymphoma of the nasal cavity [1,2]. The interest centered on extension to the paranasal sinuses. Elsewhere, in alphabetical order, knowledge of the subject was purposely extended by way of inputs from Greece [3], Iran [4], Israel [5], Japan [6], Malaysia [7], UK [8] and USA [9]. Therefore, it is considered to be important to present the cases identified among the Ibo ethnic group [10] their domicile being in South Eastern Nigeria. This contribution was facilitated by the hypothesis of a Birmingham (UK) group that felt that the establishment of a histopathology data pool improves epidemiological analysis [11]. This paper is the combined effort of an otolaryngologist who gave clinical insight on the cases and a pathologist who pioneered the data pool expected to yield that epidemiological information which will be suitable for analysis. Incidentally, owing to the state of underdevelopment, neither PA sections nor follow-up data are available.

CASE REPORTS

1. OJ, a 43 year old woman, consulted one of us (BCE) on account of nasal blockage of 2 years duration. There were occasional nose bleeds. It was noted that tumor extended into the nasal cavity more on the left side. The lesion was biopsied. Irregular masses up to 2.5 cm across were submitted to the co-author (WIBO). On microscopy, both inflammation and necrosis beclouded the appearances but typical round tumor cells of the lymphoid series grew in sheets with mitotic activity. Malignant lymphoma was diagnosed.

2. OF, a 40 year old woman also consulted one of us (BCE) with the complaint of nasal obstruction of 2 years duration. Granular, polypoidal growth was seen in the nasal cavities especially on the right side. Biopsy was carried out, numerous small smelly fragments being sampled. On microscopy, purulent matter was seen with strips showing sheets of poorly differentiated round hyperchromatic tumor cells.

DISCUSSION

Our small series can be likened to the Malaysian 2 year old boy with Burkitt lymphoma [7]. In this context, if the above single lymphoma case of whatever type is suitable for reportage, what of 2 cases? Perhaps, it suffices to add here some aspects of the lymphoma as experienced in this developing community. Indeed, the variety did suitably manifest as the teenager who took drugs for abortion but actually died of lymphoma [12]. Other aspects of lymphoma which are already on record concern the tonsil [13], parotid gland [14], bone [15], palate [16] and breast [17].

The above publications are indicative of the local epidemiology of the lymphoma. From Greece [3], the mean

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age was 62 years (range 42-81) with a male dominance. Our patients are both females and they are both in their 40s. In Israel [5] the mean age was 61.75 years with a range of 24-83 years with a 1:1 male-to-female ratio.

CONCLUSION

In conclusion, lymphoma is a very important disease tackled from all over the world. Hence, the present small series is deemed to be worthy of documentation. It is assumed that, by contributing from all over the world, scientific advance in the entire field of lymphoma would necessarily be guaranteed! Thus, whereas Chinese authors claimed that “chemotherapy was an integral part of the treatment and was completed by irradiation” (1), the Greeks (3) were in agreement. Of course, only the future will tell in our developing locality.

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