

# Primary manifestation of small Lymphocytic Lymphoma in the Prostate: a case report

## Lymphome à petites cellules de la prostate révélé par un syndrome urinaire obstructif: à propos d'un cas

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### RÉSUMÉ

L'infiltration lymphomateuse prostatique est rare. Nous rapportons un patient atteint par un lymphome lymphocytaire révélé par une infiltration lymphomateuse prostatique. Il s'agit d'un homme âgé de 82 ans qui a présenté une rétention aiguë d'urine. Le toucher rectal a révélé une prostate volumineuse et ferme. Le patient a une résection transurétrale de la prostate. L'examen histologique des copeaux de la prostate a montré une infiltration prostatique par des petits lymphocytes CD20+ CD5+ CD23+. L'hémogramme est normal. Vu l'âge et le caractère indolent du lymphome, le patient a été traité par chlorambucil. Cette observation stipule que l'atteinte lymphomateuse prostatique doit être considérée parmi les diagnostics étiologiques des syndromes d'obstruction du bas appareil urinaire.

### Mots-clés

Lymphome, prostate, anurie obstructive

### SUMMARY

We report a case of Lymphocytic Lymphoma presenting with primary manifestation in the prostate. A 82 year-old man presented to emergency department with acute urinary retention. Digital rectal examination revealed a voluminous and firm prostate. Histology confirmed involvement of the prostate by small B Lymphocytic Lymphoma. The patient was treated with chlorambucil. Lymphocytic infiltration of prostate is a rare manifestation. However this may also be the first sign of an undiagnosed lymphoma. This observation shows that the prostatic lymphoma must be considered among the causes of low urinary retention.

### Key - words

Lymphoma, prostate, anuria obstructive

Acute retention of urine as the first clinical manifestation of an asymptomatic lymphoma is found only in sporadic case reports (1). We report a case of Lymphocytic Lymphoma presenting with acute urinary retention due to lymphoma involving the prostate.

### CASE REPORT

A 82 year old presented to Emergency department with acute urinary retention. He had no past medical history. Rectal examination revealed a grossly enlarged and firm prostate with normal consistency and a right inguinal lymphadenopathy. He was catheterised in the emergency department. His blood tests showed a normal full blood count, liver and renal function tests. The serum Prostate-specific Antigen (PSA) was 0.6 ng/ml (Normal <4ng/ml). Transabdominal ultrasound examination revealed a voluminous prostate. The patient underwent transurethral resection of the prostate. Histological and immuno-histochemical studies of transurethral biopsy of the prostate showed an infiltration by small B cell lymphocytic CD20+CD5+ CD23+ CD79a+ (figure1 and 2). A bone marrow biopsy showed an infiltration by small B cell lymphocytic. The patient had a successful post-operative recovery. Then, he was managed with monochemotherapy chlorambucil given the age and surgical resection. He had an improvement of urinary symptoms.

Figure 1: Small lymphocytic lymphoma of the prostate

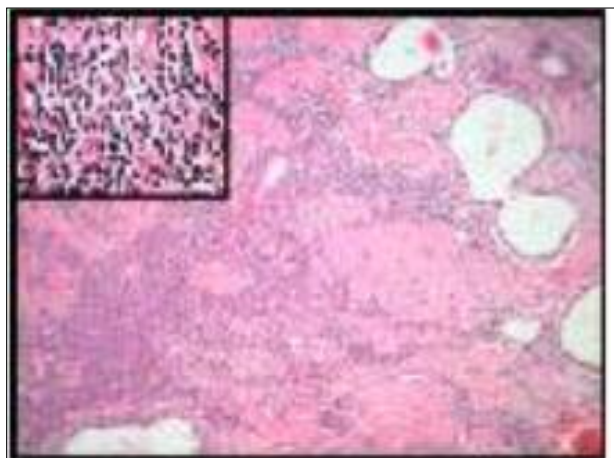
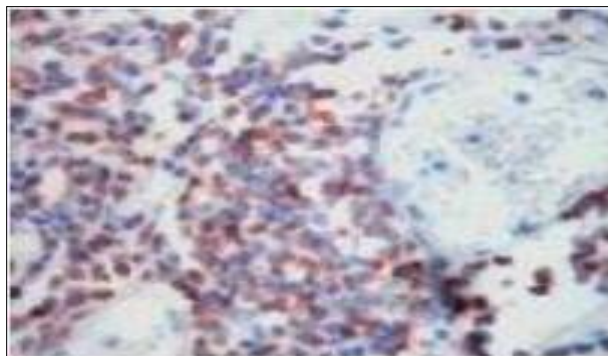


Figure 2 : -CD20 immunostain of diffuse small cell B lymphoma of the prostate



### DISCUSSION

Prostatic lymphoma is uncommon and represents less than 1% of NHL (2). Low grade non-hodgkin's lymphoma is the most commonly encountered disorder (3). Involvement of the prostate by small lymphocytic lymphoma is unusual in early-stage disease and thus quite frequently encountered in post-mortem examinations (4). Lymphoma of prostate most commonly presents as urinary obstructive symptoms and acute urinary retention the case of our observation, rarely haematuria (5). It is believed that infection or chronic inflammation may be triggers for malignant transformation in the prostate. Both in our observation that the observations reported, the prostatic lymphoma was diagnosed only on examination of the prostate biopsy by transurethral resection or at autopsy (6). In our case, lymphoma prostate is considered secondary lymphoma given the bone marrow infiltration. The treatment options include surgery resection or chemotherapy and or local prostatic radiotherapy. Surgical treatment, especially prostatectomy doesn't affect the survival; it may have a symptomatic effect. Although it was demonstrated benefit in overall survival when combined with chemotherapy and radiotherapy (7), our patient did not have radiotherapy given the age and surgery resection.

### CONCLUSION

Lymphocytic lymphoma of the prostate associated with obstructive symptoms is rare but can already occur in very early disease. It should be considered in the differential diagnosis of patients presenting with low urinary retention.

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