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Large B cell lymphoma mimicking brain abscess as a presentation of Late-Onset PTLD in a Pancreas-Kidney transplantation patient: A Case Report

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Introduction: Posttransplant lymphoproliferative disorders (PTLD) are rare, but serious complication following transplantation. Incidence is 1–5% in solid organ transplants and 0.8% in pancreas kidney transplantation. 80 % of cases are diagnosed within the first year of transplantation. We present a case of large cell Diffuse B lymphoma which presented more than ten years after kidney and pancreas transplantation.

Case Presentation: A 53 year old female with a complicated past medical history including a history of Pancreas Kidney transplantation in 2006 for Type 1 Diabetes and ESRD and multiple hospitalizations for opportunistic infections and surgeries; was admitted to the Sanford Medical Center in Sioux Falls SD in late January 2017 with acute onset of left facial droop and right arm weakness. MRI showed a 2.2 x 1.8 x 1.6 cm left posterior frontal mass with surrounding edema. Brain biopsy showed necrosis with chronic inflammation suggestive of an abscess. Ceftriaxone and Metronidazole were started in addition to steroids. The patient showed some clinical improvement and then was discharged on antibiotics and steroids. A month later, the patient was re-admitted due to slurred speech and difficulty writing. MRI confirmed the persistence of the lesion as well as a new adjacent 1.5 x 0.7 cm ring-enhancing lesion. The patient underwent craniotomy with the removal of the lesion. Histopathology this time established the diagnosis of a primary CNS diffuse large B-cell lymphoma as part of PTLD. After diagnosing the patient with PTLD, antibiotics were stopped and the patient was started on Rituximab and Methotrexate. She underwent a total of 6 cycles which ended in July 2017 with a good clinical response. MRI imaging afterwards showed no change from previous exam suggesting no recurrence. A whole body PET scan from cranium to thigh on August 2017 showed no evidence of residual/recurrent intracranial tumor activity.

Conclusion: Primary central nervous system post-transplant lymphoproliferative disease (CNS PTLD) is a serious complication after solid organ transplantation. It's difficult to diagnose, frequently diagnosed too late and often refractory to treatment. A more aggressive screening and high suspicion are necessary for patients even with mild CNS symptoms.

Biography

Muhanned Mohammed is working in National Ribat University, Khartoun-Sudan. He attended many conferences and published his research in many reputed journals.

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