

## Lymphoma non Hodgkin-Burkitt lymphoma – Case report

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### Abstract

**Introduction:** Lymphoma is the most common blood cancer. The two foremost systems of lymphoma are Hodgkin lymphoma (HL) and non-Hodgkin Lymphoma.

**Purpose:** Different types of NHL- Patterns of spread in different types of NHL-Initial diagnostics in suspect NHL-Risks associated with different types of NHL-Possibilities for treatment and potential outcomes- Presentation of the case with Burkitt Lymphoma, which treatment in our ward. Burkitt lymphoma (BL) is an uncommon form of non-Hodgkin lymphoma. Burkitt's lymphoma is an aggressive B-cell form of NHL that occurs most often in children and young adults. BL named after British surgeon Denis Burkitt, who first identified this unusual disease in 1956 among children in Africa. The disease may affect the jaw, central nervous system, bone marrow, bowel, kidneys, ovaries or other organs. There are three chief types of Burkitt lymphoma: (endemic, immunodeficiency related, and sporadic.). Ly Burkitt affects the third most common childhood cancer. It occurs most often in children between the ages of seven and eleven, but can occur at any ages from infancy to adulthood. Its affects males almost three times more often than the female. Burkitt lymphoma may be treated with chemotherapy, radiation therapy, or autologous stem cell transplantation. Burkitt's lymphoma is potentially curable. Presentation of the case with Lymphoma Burkitt which was presented to Hematology Oncology Unit at Pediatric Clinic and has received chemotherapy treatment.

**Materials and Methods:** A male child, 6 years old, child comes to our clinic with abdominal pain, loss of appetite, fatigue, night's sweats and fever. After the examinations of: anamnesis, laboratory-hematology analysis, biochemical, RTG chest, USG and CT neck, chest, abdomen, pelvic After Ct examination in conclusion: Ct thorax (is not represents the mediastinal and axillar lymph nodes) and Ct abdominal (lymph nodes mesenterialis), we prefer the biopsy and immunochemistry. The obtained results from pathology prove Lymphoma Burkitt.

**Results:** After the diagnosis it was indicated the treatment protocol of chemotherapy for Burkitt Lymphomas R-CHOP 21 (Rituximab, VCR, Doxorubicine, Cyclophosphamide, and Prednisolon) for six cycles. The child was admitted in our ward, to start and continue chemotherapy, the treatment was

continued by doctors in our ward. Monitoring of his disease, continuing chemotherapy, laboratory chest, radiological images (CT neck, chest, abdomen, pelvic), are made by our ward, institute of University Clinical Center of Kosovo.

**Conclusion:** Application of protocol RCHOP -21, the resection of the lymph nodes, monitoring of chemotherapy toxicity, supportive care, has caused in absence of slight residual disease which confirmed by the follow up of his clinical status, radiology images (PET scan), laboratory tests, that resulted the absence of secondary deposits. Now the child is a good health condition, and visits our clinic to follow up his condition.



### Biography:

Flora Selimi is a Pediatrician in ward Hematology from University Clinical Center, Pristina, Albania.

### Speaker Publications:

1 "Iron and transferrin in children with sideropenic anemia"; EHA Library /2015/ 102871; PB1992.

[19<sup>th</sup> World Congress on Clinical Pediatrics](#), Prague, Czech Republic, April 27-28, 2020, Webinar.

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