

A Nonclassical Presentation of Classical Hodgkin Lymphoma

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A Nonclassical Presentation of Classical Hodgkin Lymphoma

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INTRODUCTION:

- Hodgkin lymphoma is a malignant condition of lymphoreticular cell origin
- Affects approximately 7,500 Americans each year
- Typically presents with “B symptoms” such as fever, night sweats, weight loss and chills
- In rare circumstances, this disease can masquerade as an immunodeficiency or autoimmune process

CASE DESCRIPTION:

Initial presentation

- 66 y/o male with a history of hypertension who initially presented with thrombocytopenia and neutropenia on outpatient labs
- Bone marrow biopsy negative for malignancy
- Abdominal ultrasound negative for splenic abnormalities
- Treated with Valtrex for suspected shingles on forehead

Initial presentation

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- Four days later
- Labs revealed worsening thrombocytopenia
- Diagnosed with ITP and treated with Decadron and IVIG
- Skin biopsy consistent with herpes incognito
- Three months later
- ITP refractory to treatment
- CT of abdomen showed numerous splenic lesions
- Underwent splenectomy that revealed pathology consistent with Hodgkin Lymphoma
- Started on ABVD therapy with brentuximab

DISCUSSION:

- There are a multitude of presentations of Hodgkin lymphoma.
- Approximately 1-2% of HD cases present as refractory ITP or neutropenia with the absence of B symptoms.
- Consideration of lymphoma should be made in cases with refractory thrombocytopenia despite normal exam and lack of B symptoms

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