

Diagnostic Challenges of a Rare Case of Classical Hodgkin Lymphoma Mimicking TB Spondylodiscitis in a Young Adult: A Case Report

Raimi A.H.; Daniel D.; Marazuki P.

Department of Orthopaedic Hospital Tengku Ampuan Afzan, Kuantan, Pahang, Malaysia.

INTRODUCTION:

Spinal malignant lymphoma is a rare disease that can cause pain, neurological issues, or spinal instability. It's difficult to diagnose and can be misleading towards TB spondylodiscitis and histopathological diagnosis is hindered by the nature of the disease.

REPORT:

A twenty-three-year-old male presented with worsening low back pain for 1 year. On clinical examination, there was tenderness at the midline of thoracolumbar junction with no neurological deficits seen. Radiological findings showed a mixed lytic and sclerotic lesion involving the body of L1 vertebra while laboratory investigations revealed an elevated inflammatory marker. MRI findings suggested L1 spondylodiscitis with prevertebral, paravertebral, and bilateral psoas abscesses. Transpedicular biopsy specimen showed chronic suppurative granulomatous inflammation and this necessitated initiation of anti-tuberculosis therapy. Nevertheless, the patient came back after three months with sudden MRC grade II bilateral lower limb weakness as well as urinary retention on physical examinations. The repeat MRI confirmed progressive spondylodiscitis with larger abscesses causing spinal cord stenosis, edema and associated generalized lymphadenopathies as well. Patient underwent posterior spinal stabilization and decompression with mesh cage insertion. Intraoperative showed excessive granulation tissue over anterior and middle column of L1. HPE revealed Classical Hodgkin Lymphoma. The patient then started on chemotherapy. His neurological status remained unchanged. The previous transpedicular biopsy sample was revisited, and Hodgkin lymphoma cells were missed due to their sparsity in nature.



Figure1: X-ray

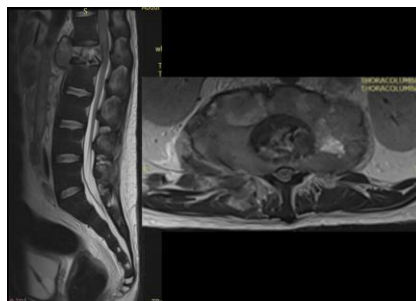


Figure2: MRI

CONCLUSION:

Extranodal-lymphoma requires a tissue biopsy for diagnosis. Misdiagnosis and delays in recognizing Classical Hodgkin Lymphoma highlight the importance of thorough histological examination. Malignant cells can be easily missed due to their sparsity, emphasizing the need for a multidisciplinary effort to obtain a good histological sample and accurate analysis.

REFERENCES:

1. Hashi et al., Management of extranodal lymphoma of the spine: a study of 30 patients. *CNS Oncology*. 2018;7(2): CNS11.
2. Wang et al., Diagnosis of Hodgkin lymphoma in the modern era. *Br J Haematol*. 2019;184(1):45-59.