A Challenging Differential Diagnosis of Iron Deficiency Anemia: Gastrointestinal Lymphomas

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Gastrointestinal lymphoma is an extremely uncommon clinical condition and accounts for 1%-4% of all gastrointestinal cancers. Appendiceal lymphomas constitute 0.015% of all gastrointestinal lymphomas; besides they can be found anywhere in the gastrointestinal tract. Extranodal non-Hodgkin’s lymphoma most frequently occurs in gastrointestinal organs, accounting for 30%-40% of all cases. Diffuse large B-cell lymphoma and marginal zone B-cell lymphoma of the mucosa-associated lymphoid tissue (MALT) are the most prevalent histopathological subtypes. This heterogeneous group of diseases can present with atypical symptoms at first and mimic several gastrointestinal entities. Since the diagnosis is challenging, an accurate diagnosis can be delayed.

A 71-year-old man presented with a 2-week history of rectal bleeding and iron deficiency anemia. His medical history included diabetes type 2, coronary heart disease, and cholecystectomy. He neither smoked nor drank. Physical examination showed nothing abnormal except hemorrhoids. Laboratory examination revealed a hemoglobin count with a value of 9.1 g/dL. The patient underwent colonoscopy, which revealed rough glandular structures at the base of the cecum that completely encircle the appendiceal orifice (Figures 1 and 2). Histopathologic examination of this biopsy specimen revealed monoclonal immunoglobulin (Ig) M/kappa plasma cells primarily found in superficial mucosa and small B lymphoid cells, which infiltrate lymphoid follicles and glandular structures (Figure 3). These findings were compatible with the diagnosis of gastrointestinal lymphoma.

Figure 1. Rough, glandular tissue at the base of the cecum

Figure 2. Rough, glandular tissue at the base of the cecum

Figure 3. Histopathologic examination of the biopsy specimen
with extranodal marginal zone lymphoma with IgM/kappa monoclonal plasmacytic differentiation (MALT lymphoma). A subsequent computed tomography (CT) scan of the abdomen revealed mild splenomegaly; however, the thorax CT was insignificant.

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