

# **Atelier d'Héмато-Pathologie**

***Société Tunisienne de Pathologie***

***Société Tunisienne d'Hémato-  
Cancérologie***

***Roche Tunisie***

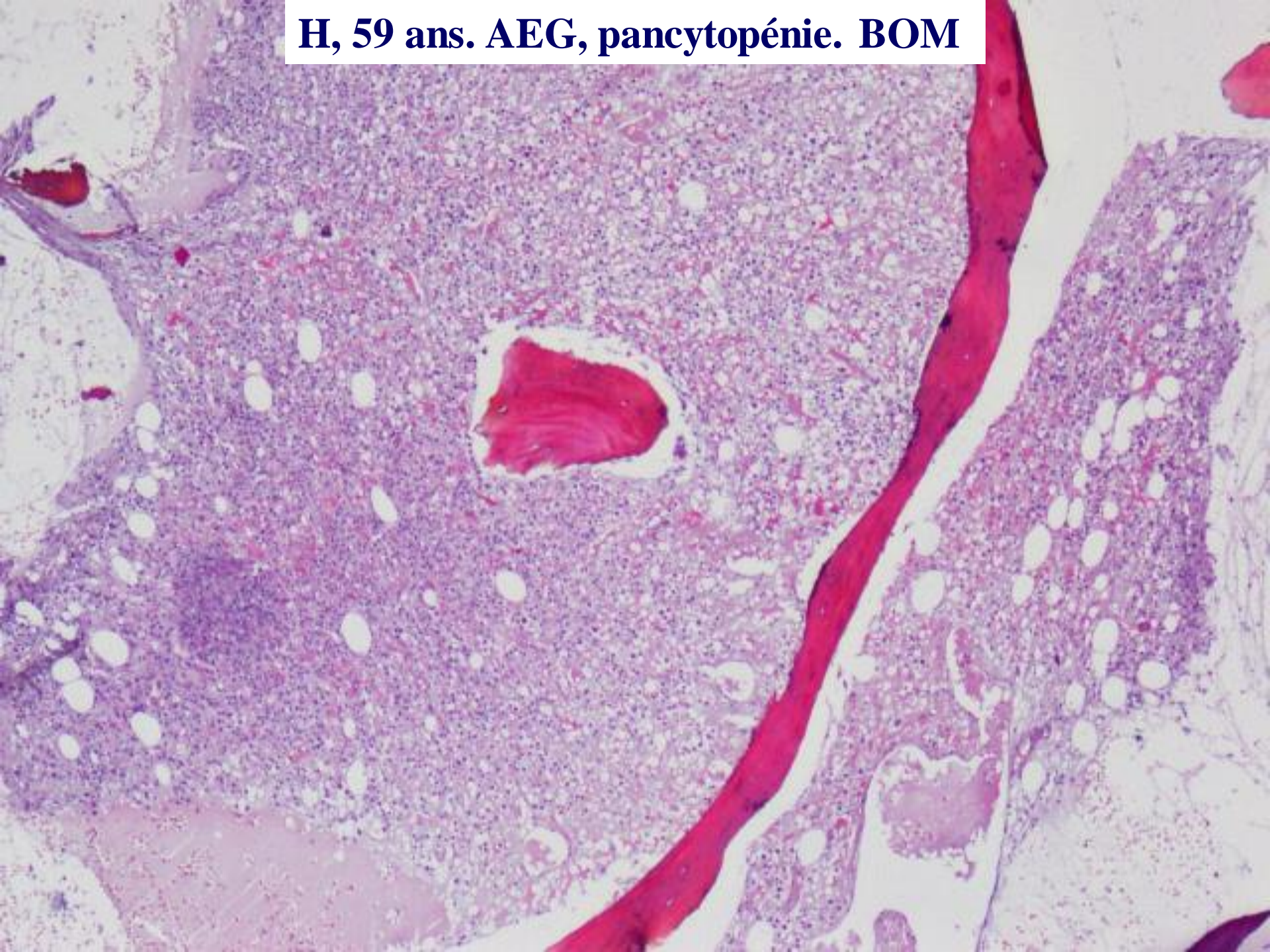
**Hammamet, 4-5 Mars 2016**

**Cas N° 7**

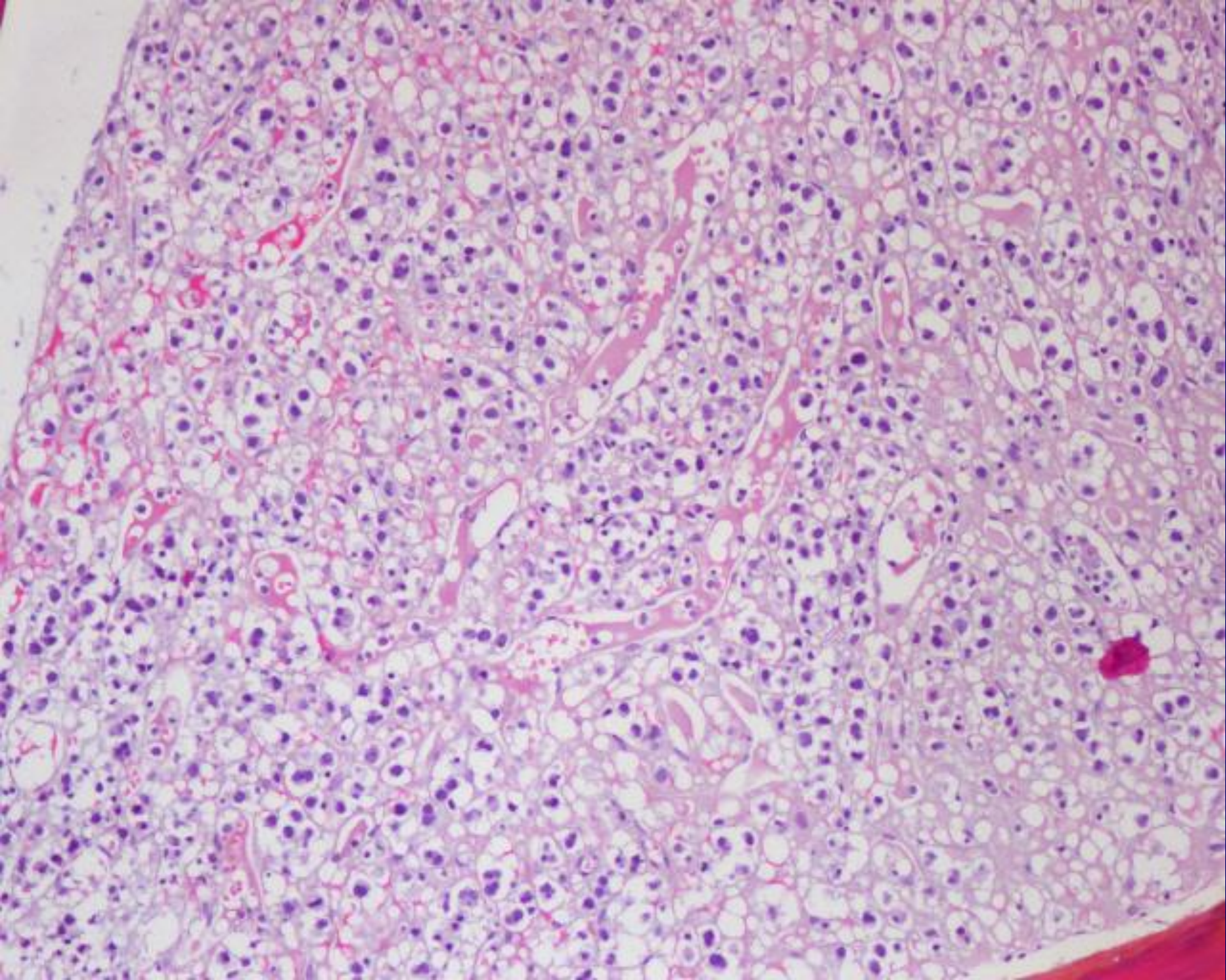
**Antoine de Mascarel, Bordeaux**

**« [antoine.demascarel@chu-bordeaux.fr](mailto:antoine.demascarel@chu-bordeaux.fr) »**

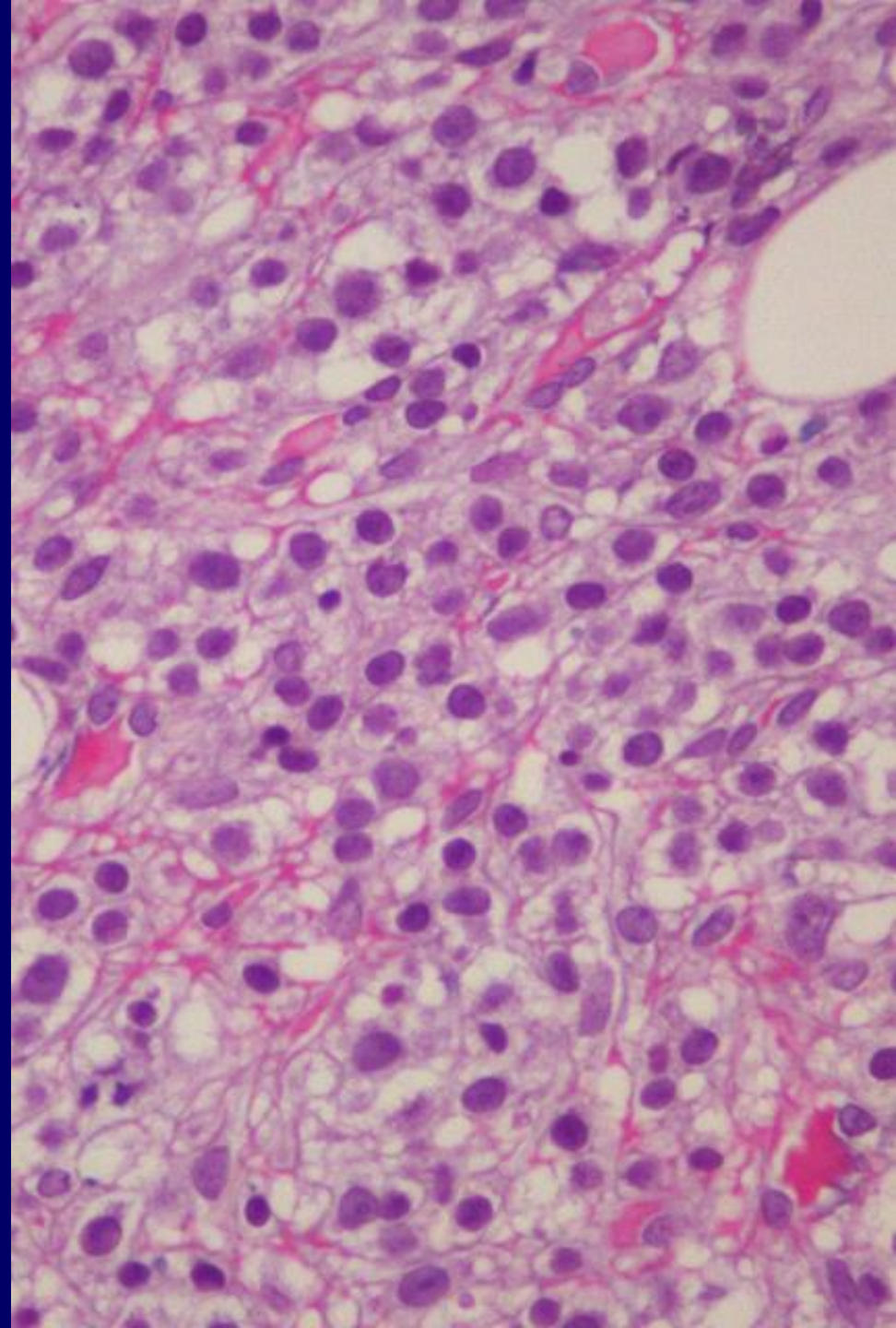
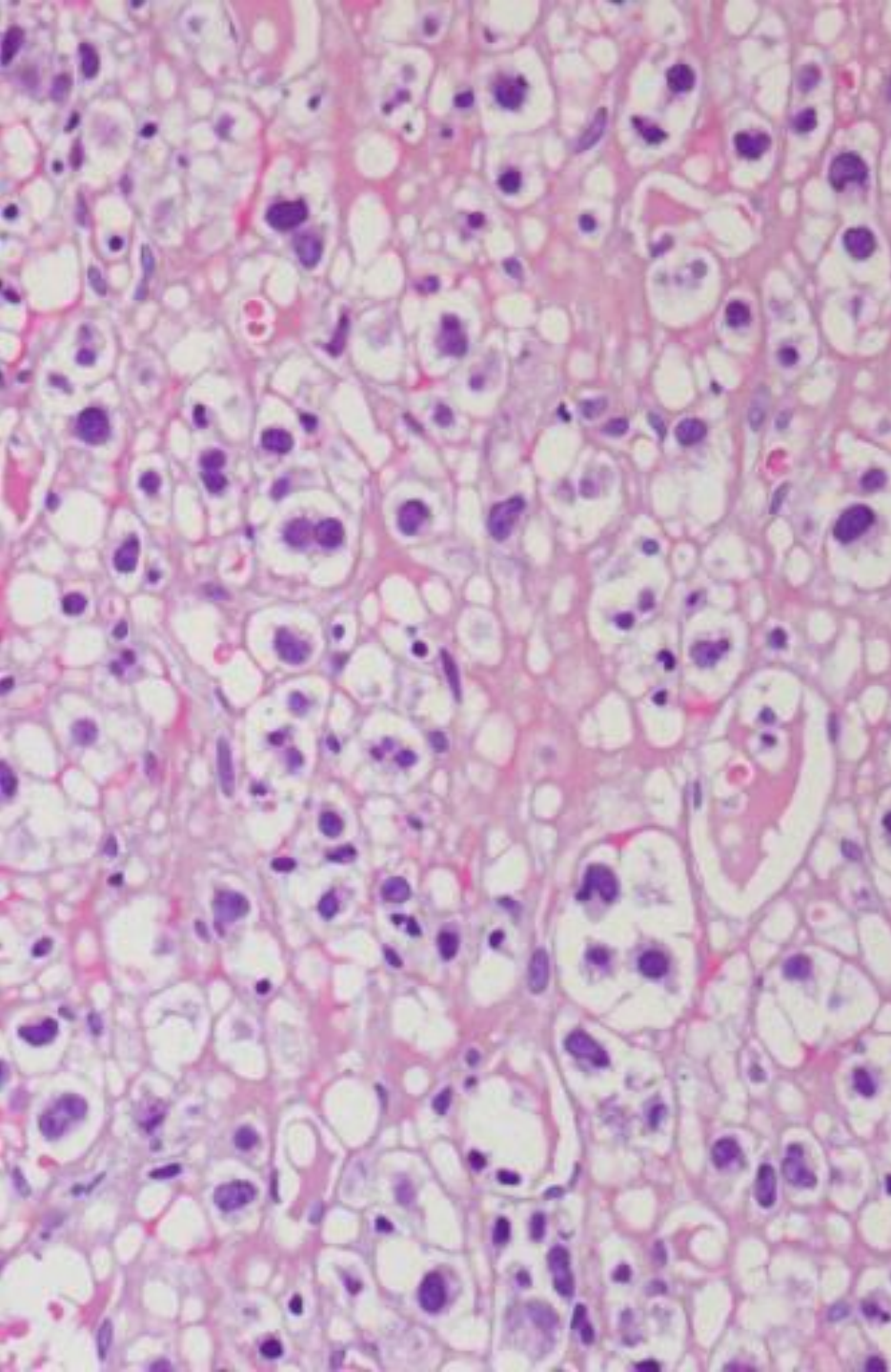
**H, 59 ans. AEG, pancytopénie. BOM**



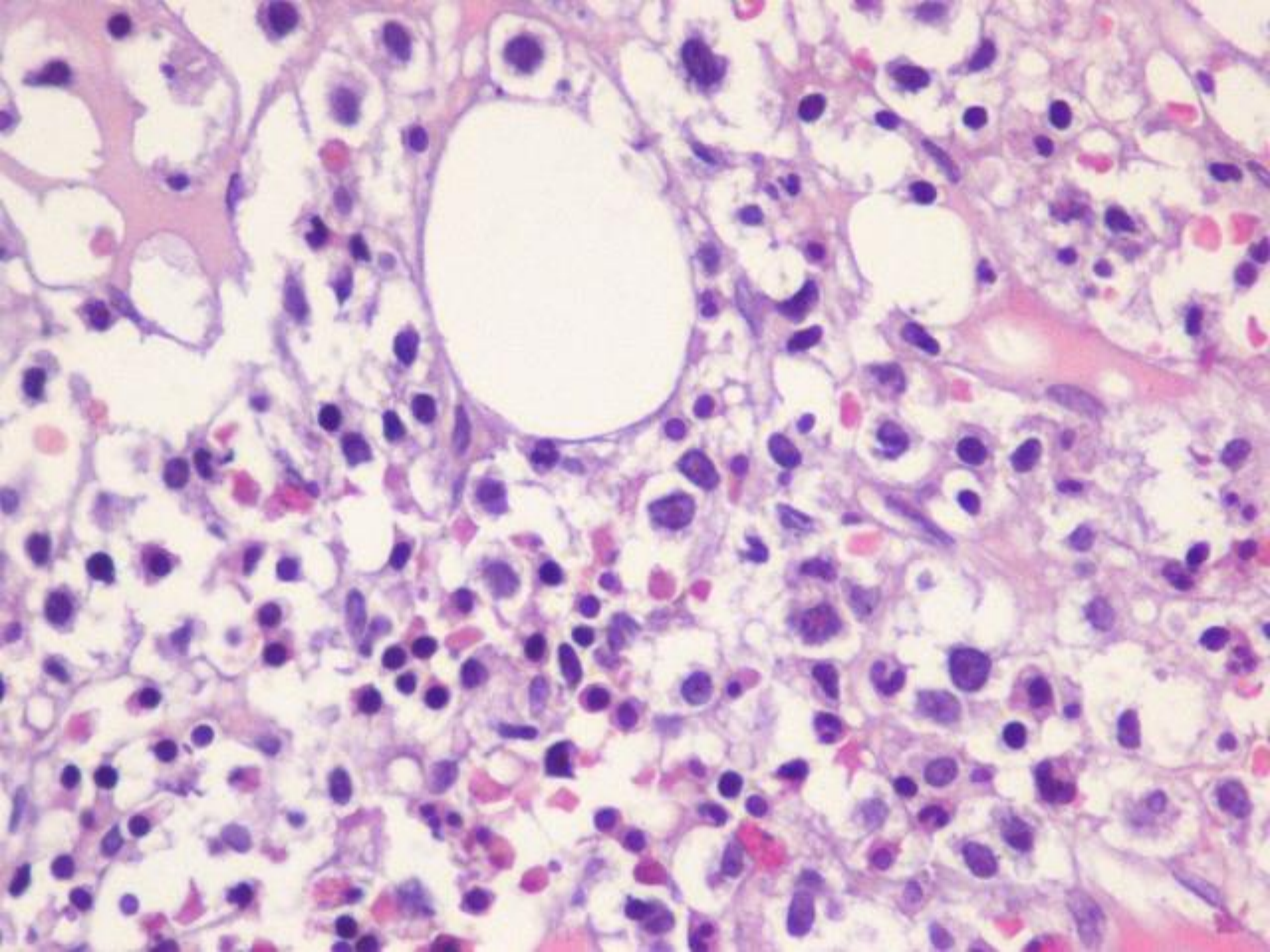




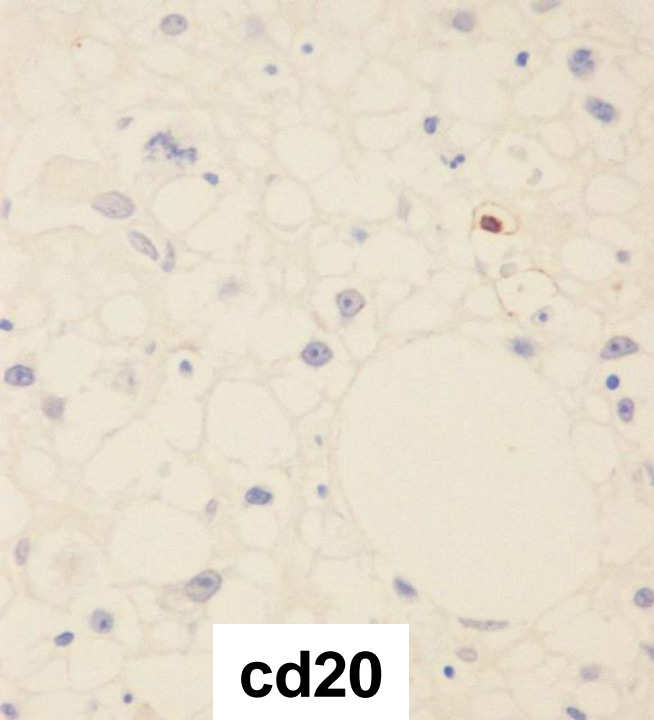




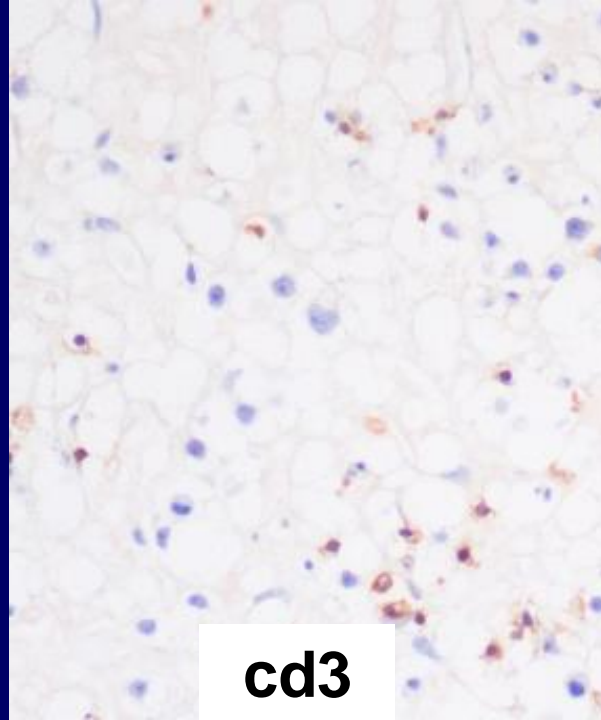




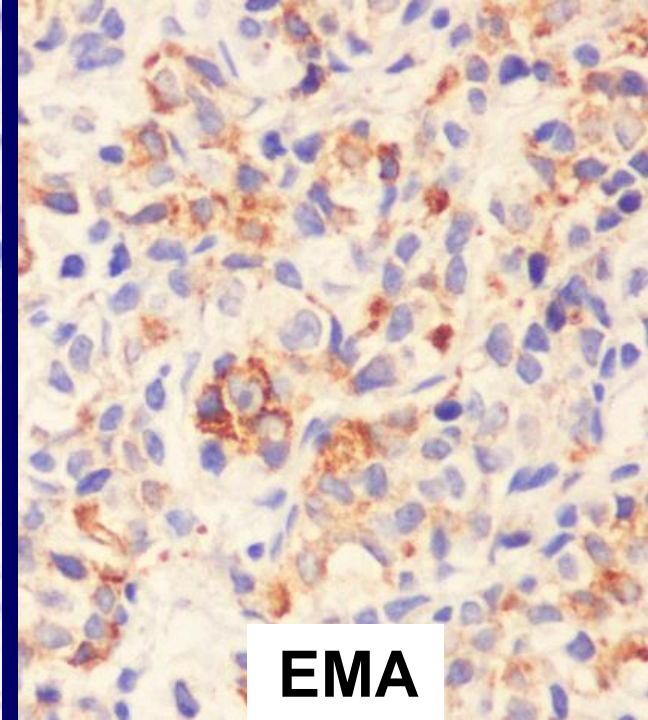




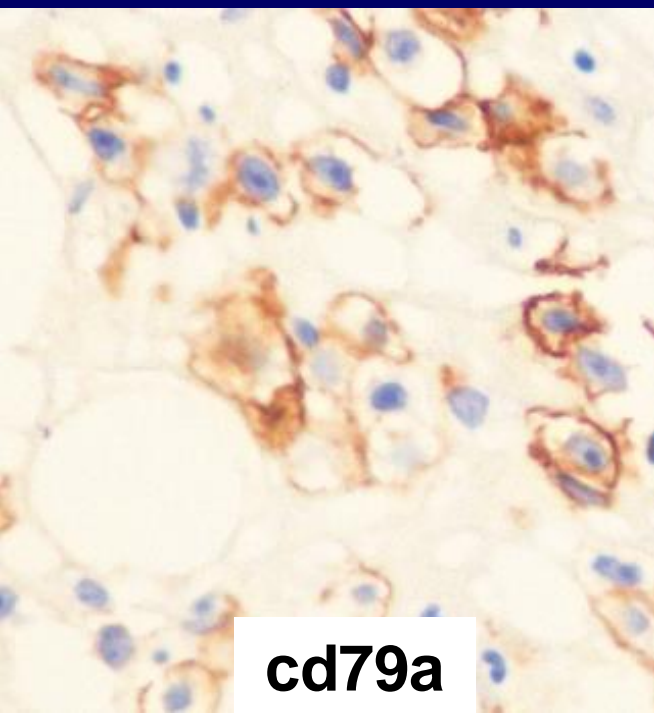
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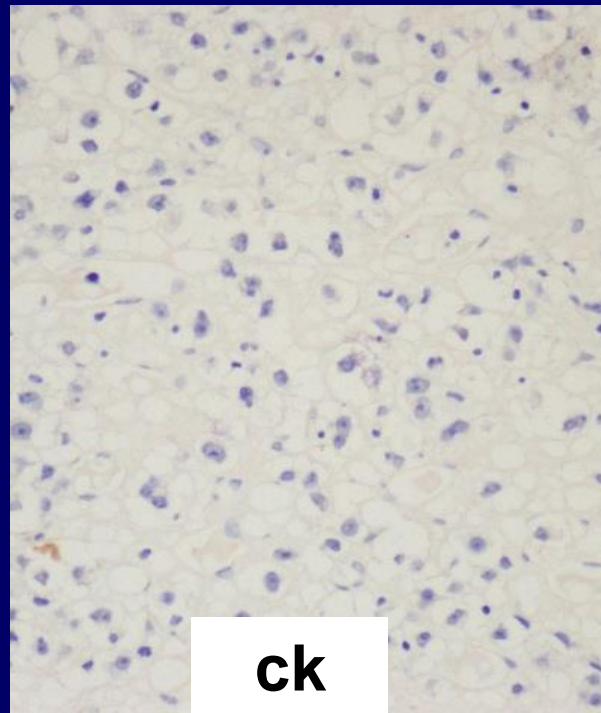
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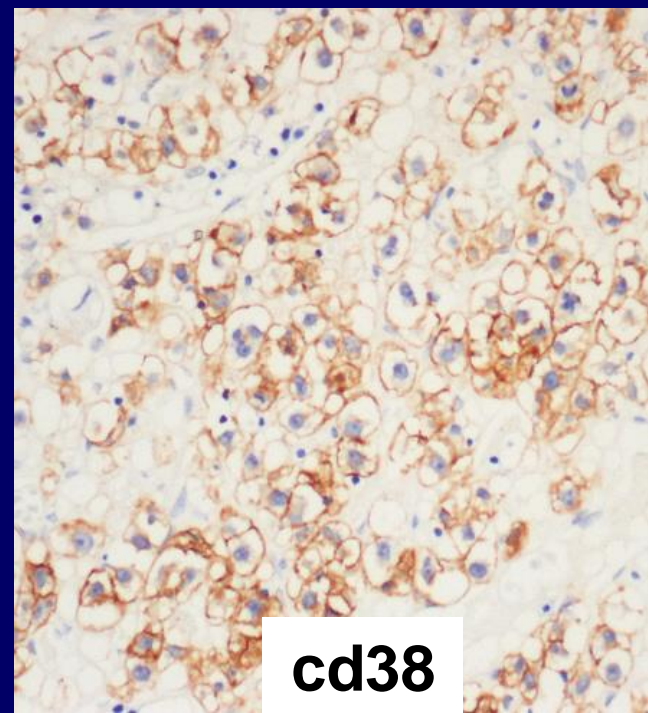
**EMA**



**cd79a**

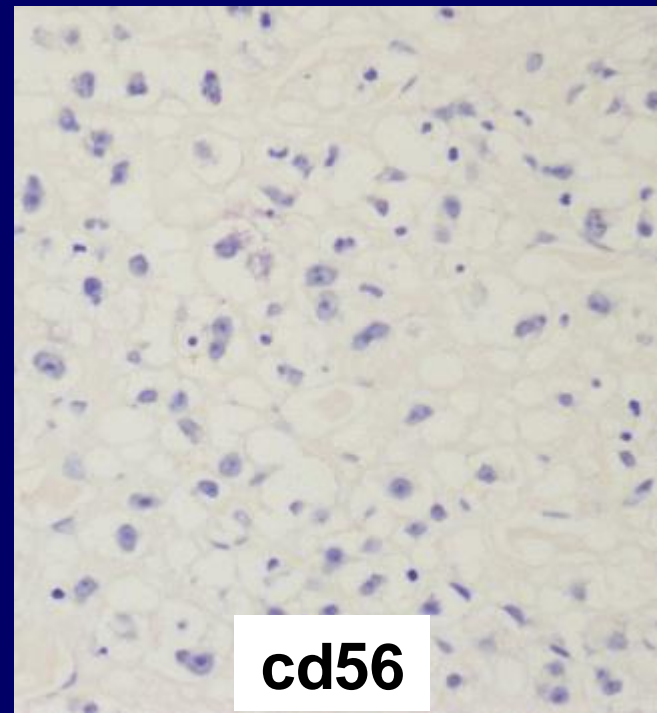
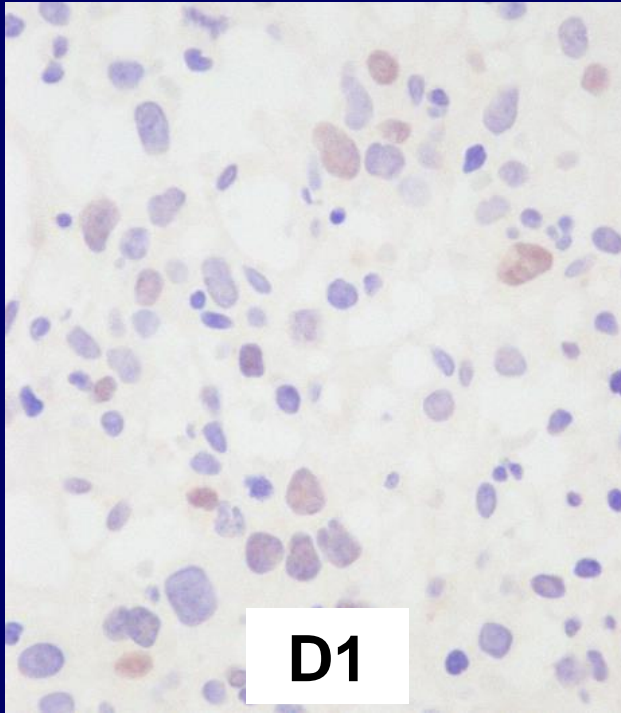
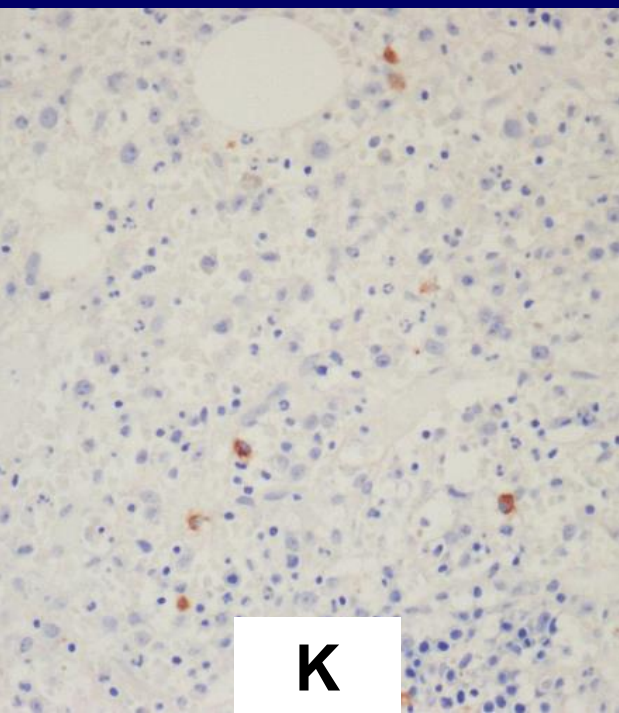
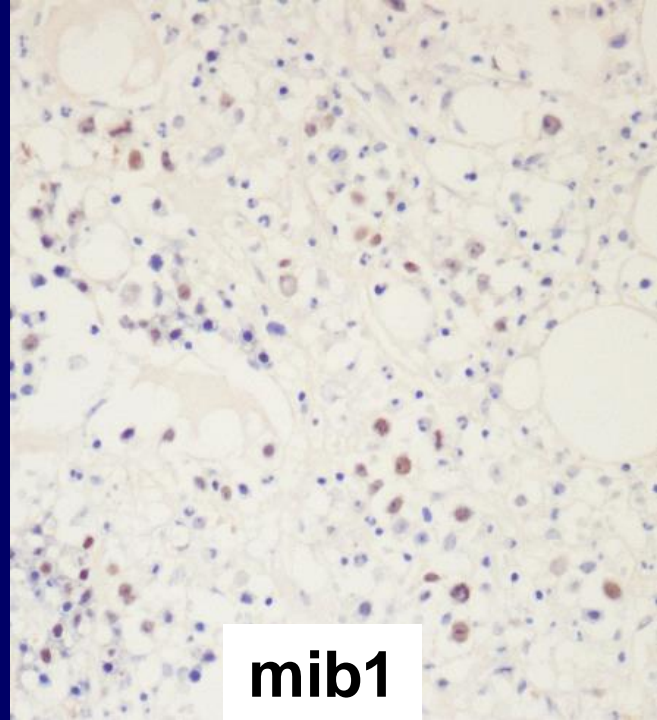
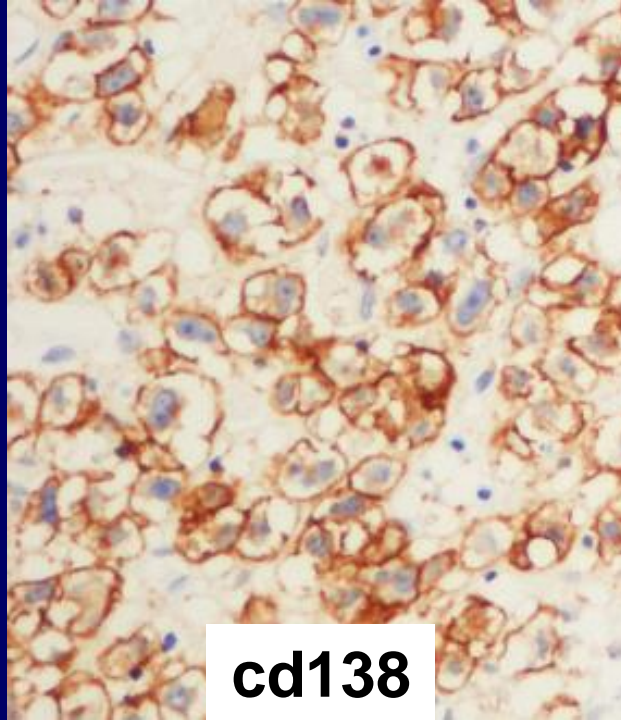
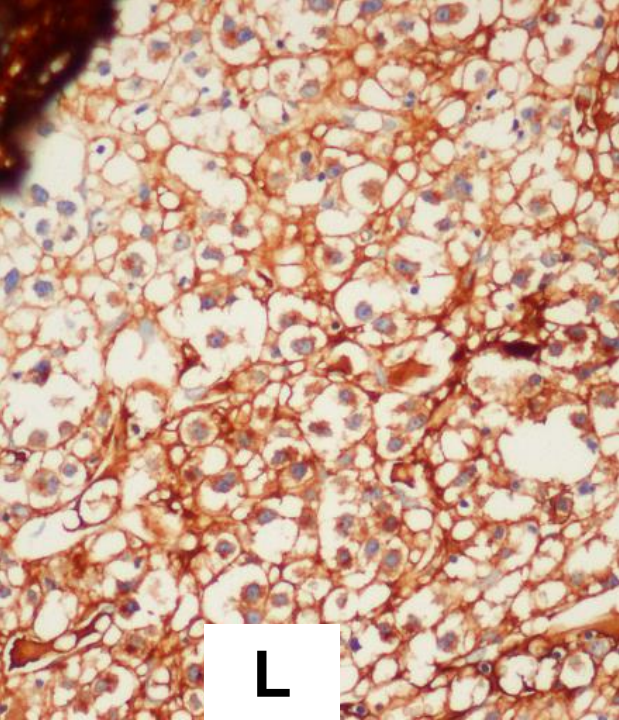


**ck**



**cd38**



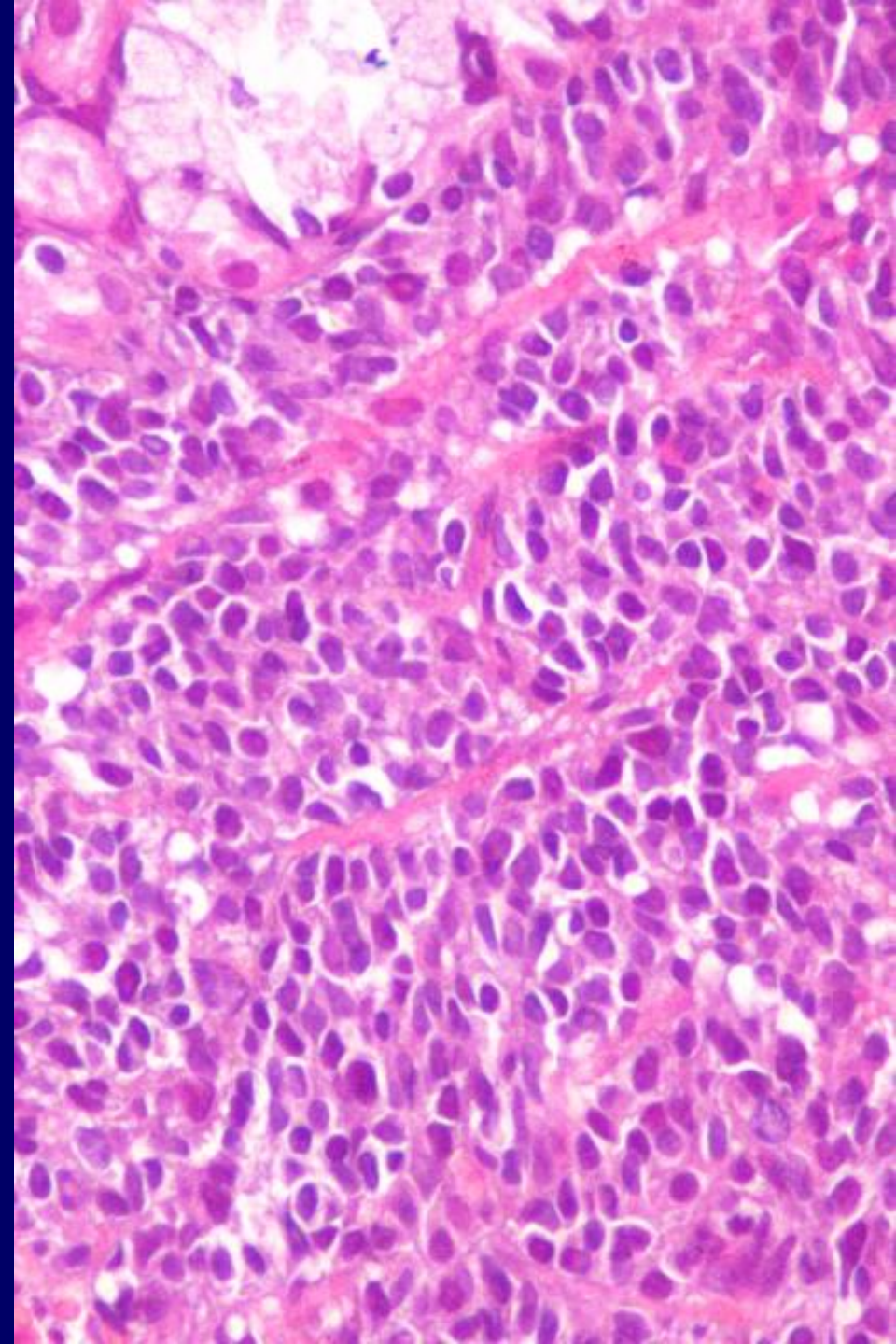
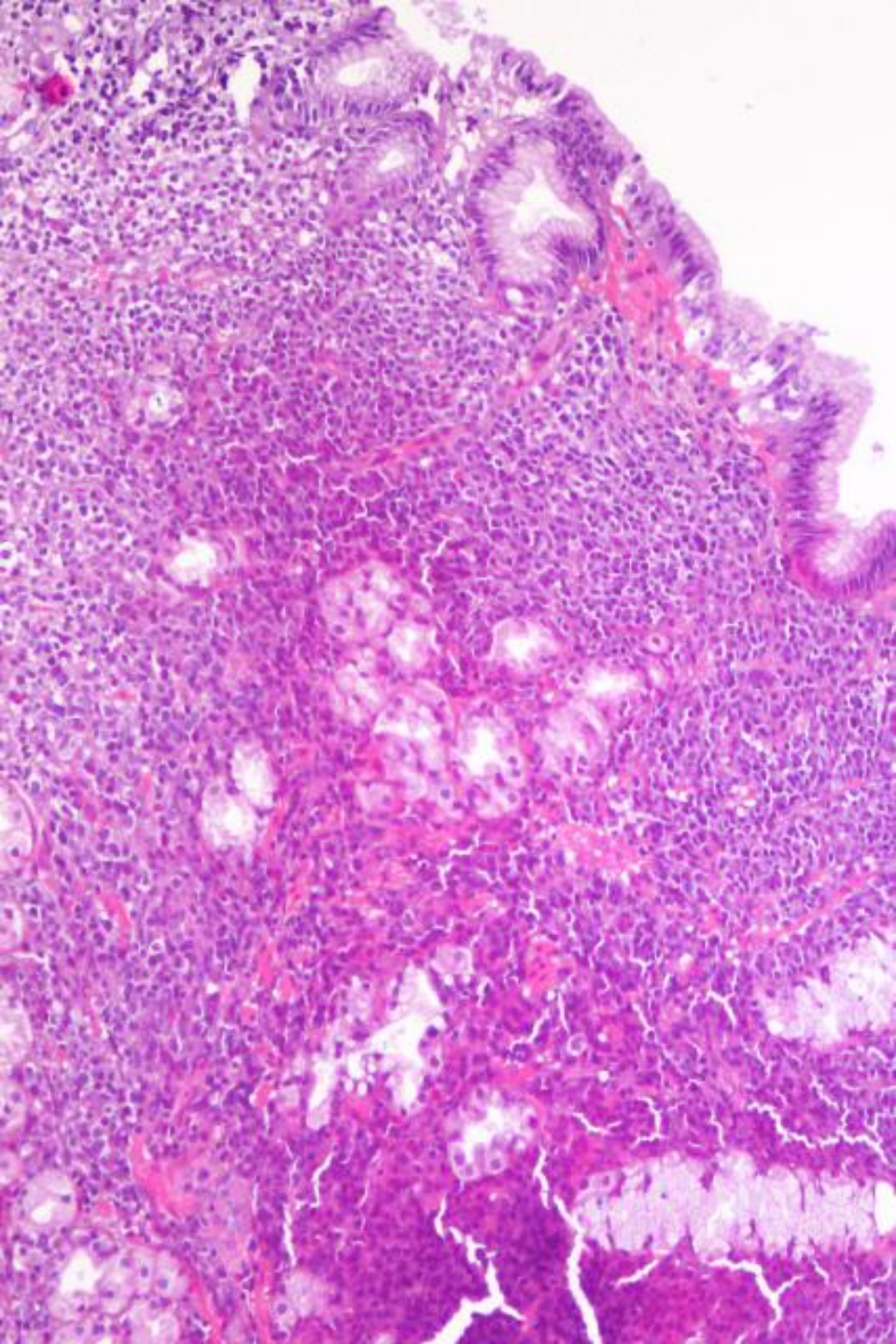


# Cas N° 7

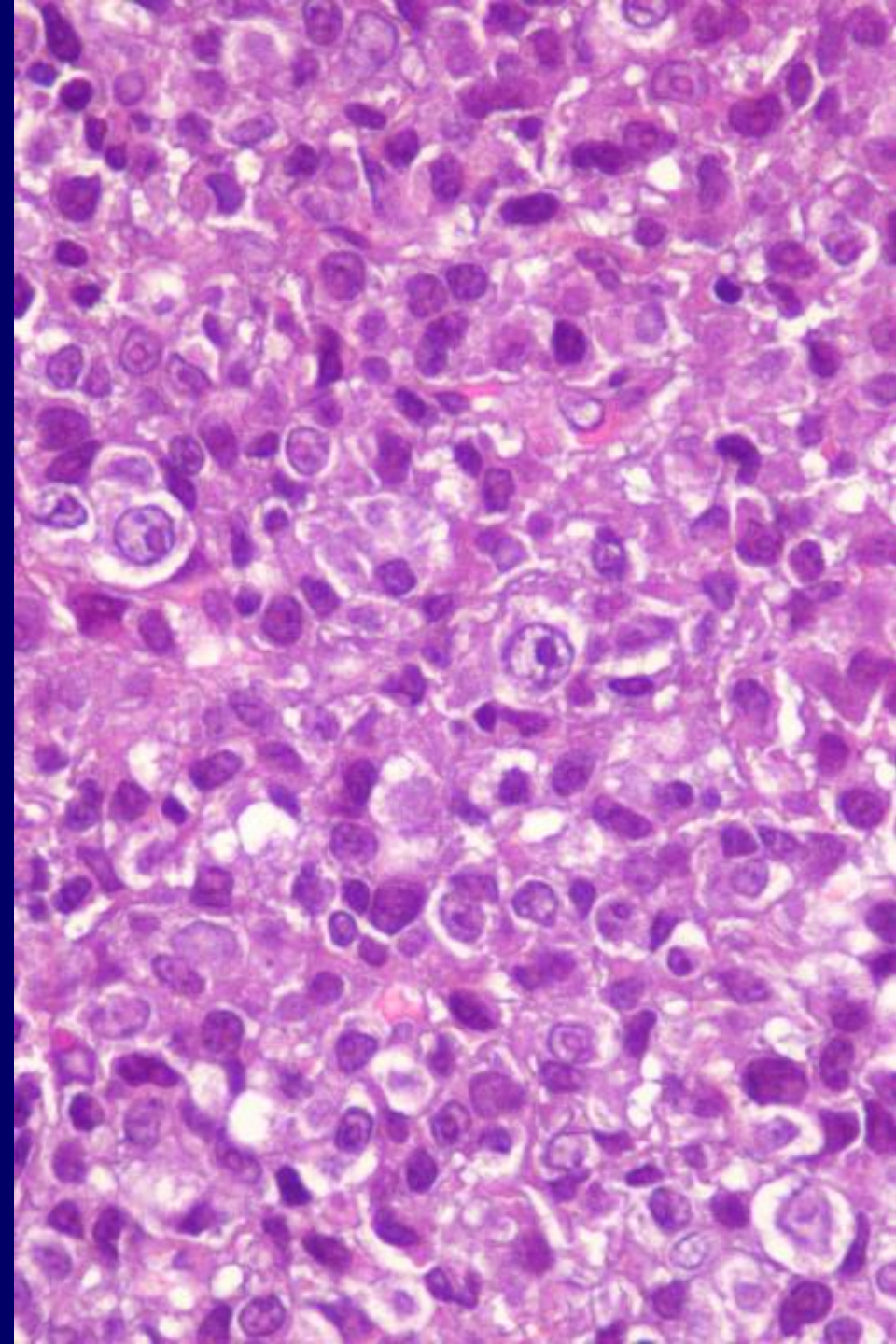
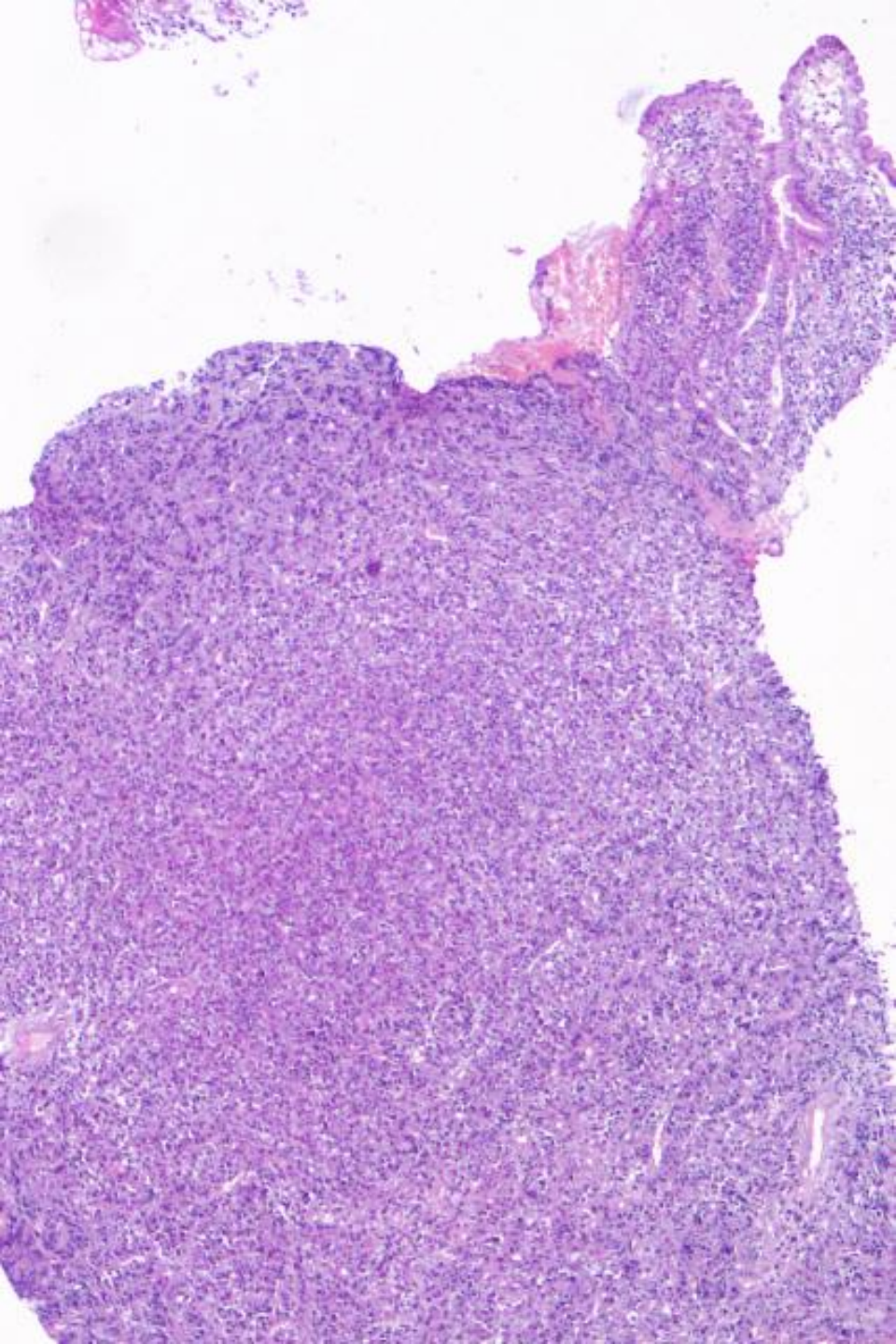
**Dc: localisation médullaire d'une prolifération plasmoblastique à interpréter en fonction des données cliniques, biologiques et radiologiques**

- **bilan: pas de lésions lytiques osseuses. RCP propose: dexasone, thalidomide, autogreffe. En attendant accord de la CNAM: épigastralgies, mélena**
- **FOGD: nombreuses lésions polypoïdes ulcérées de l'estomac et du duodénum**
- **biopsies**

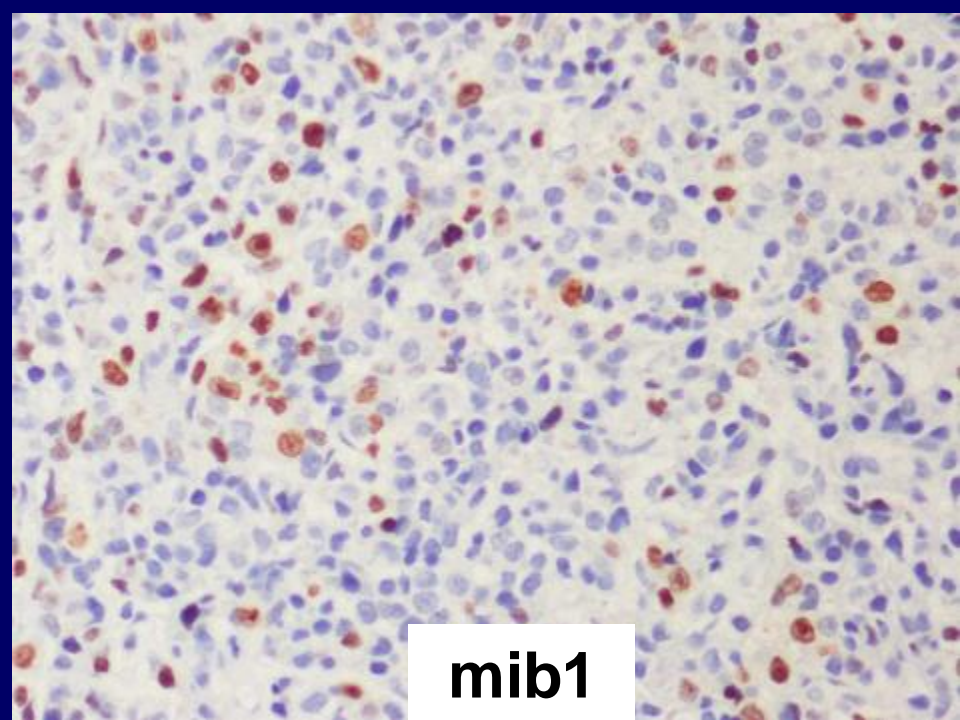
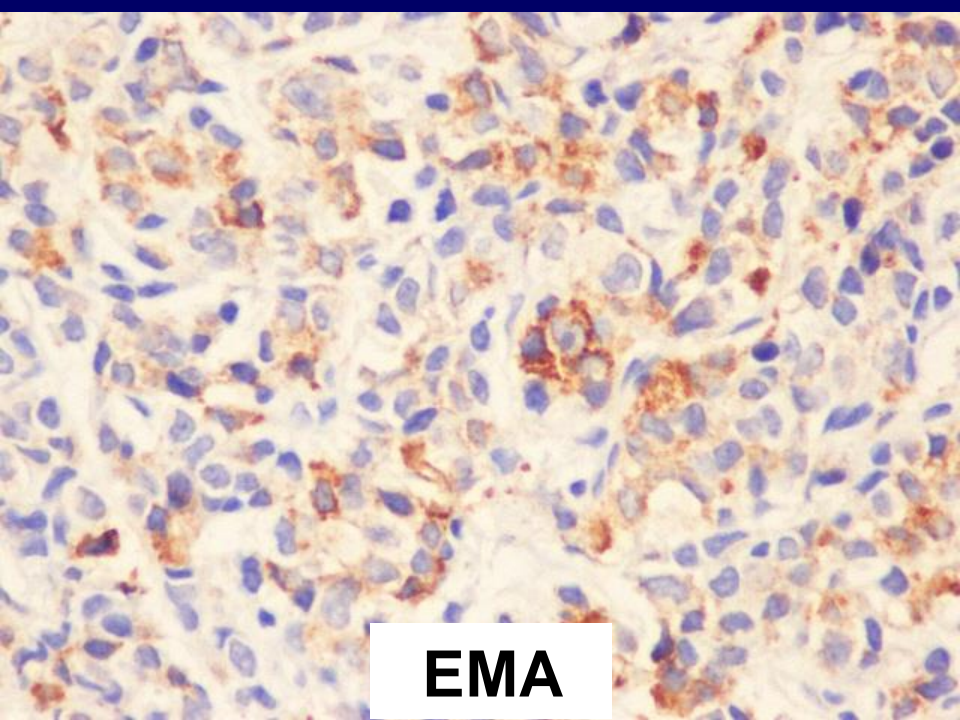
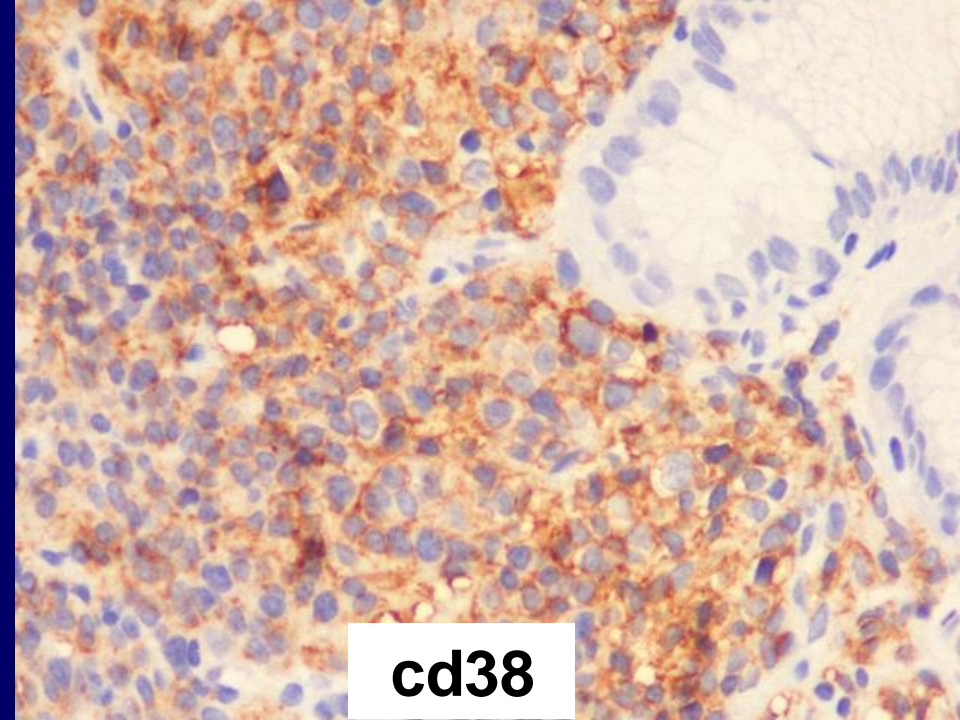
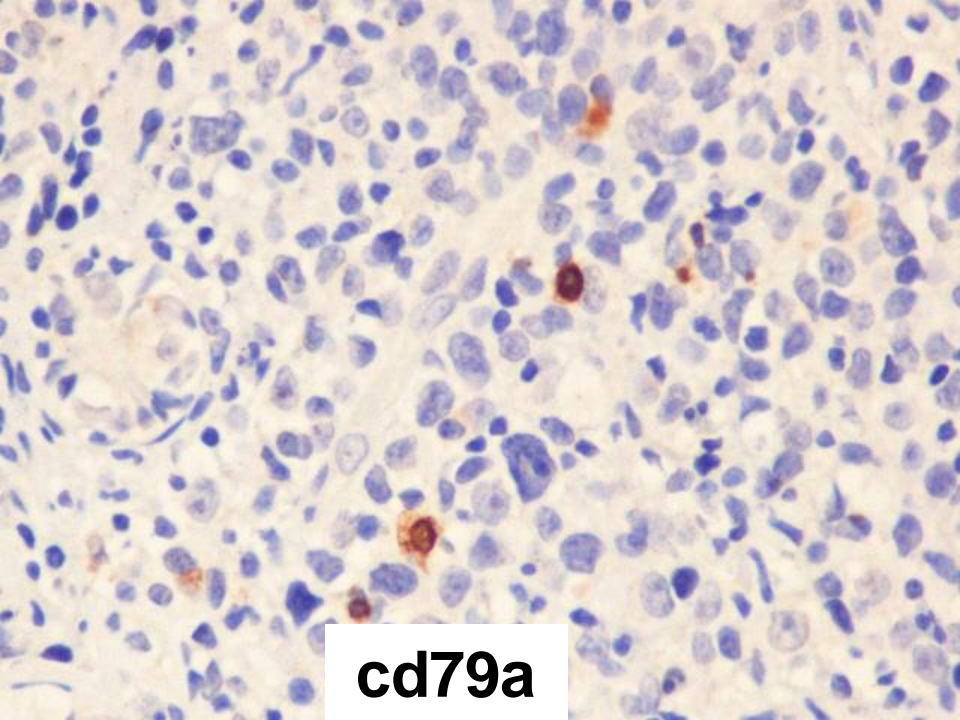




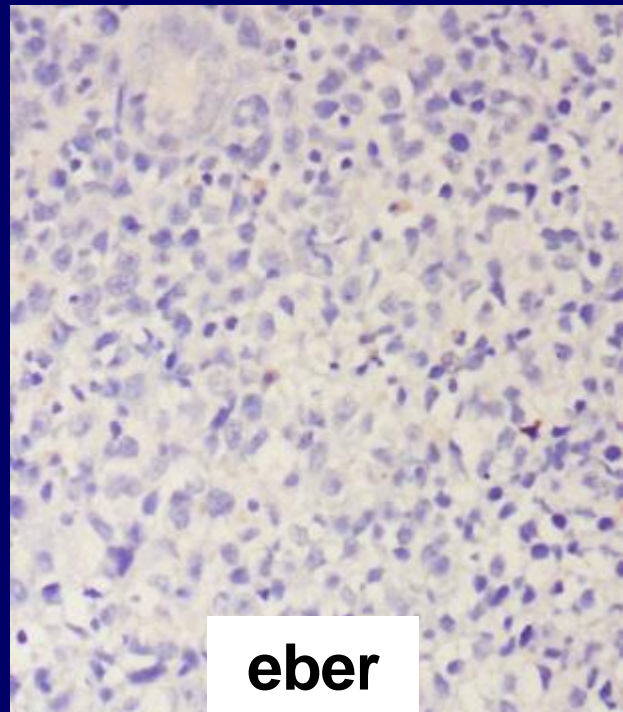
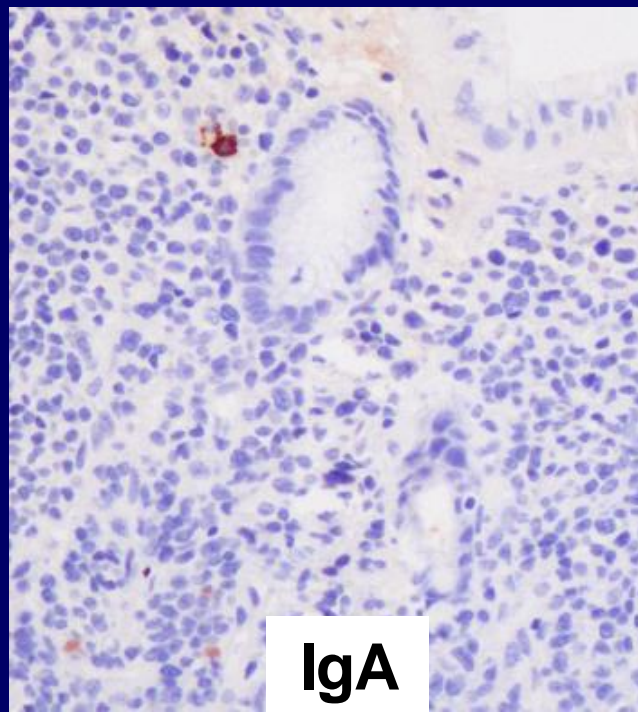
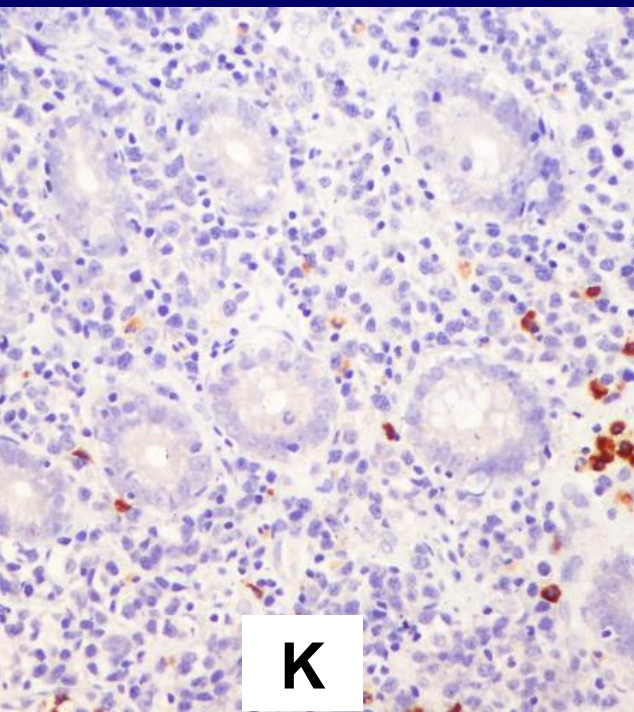
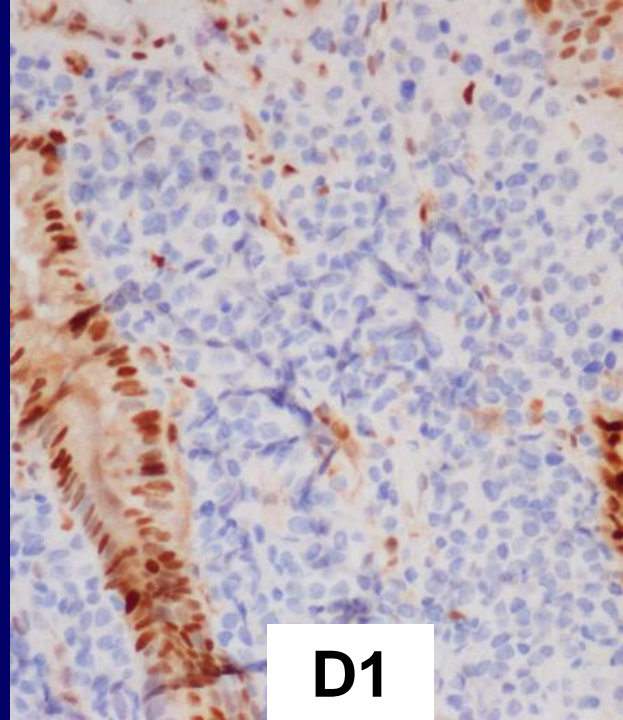
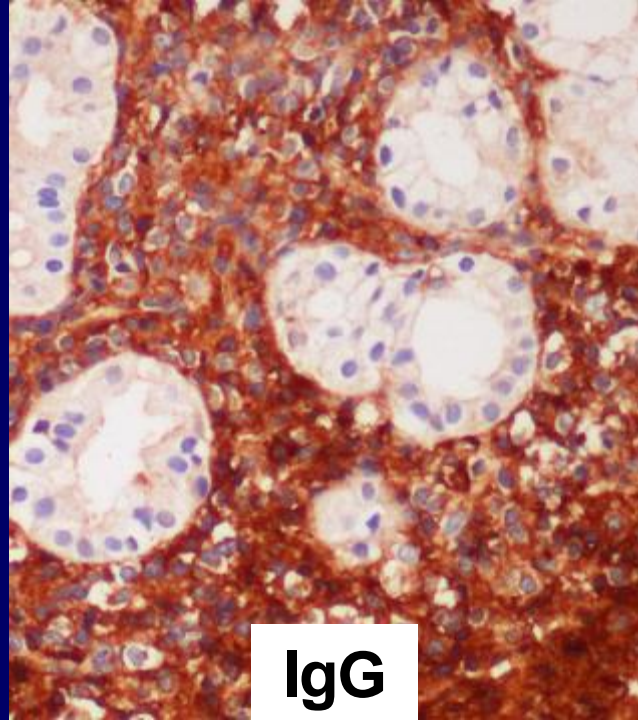
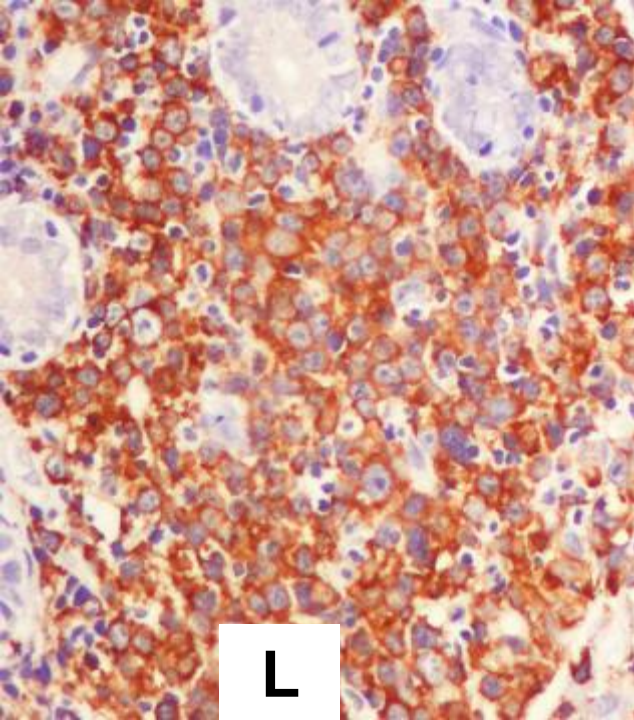














## Cas N° 7

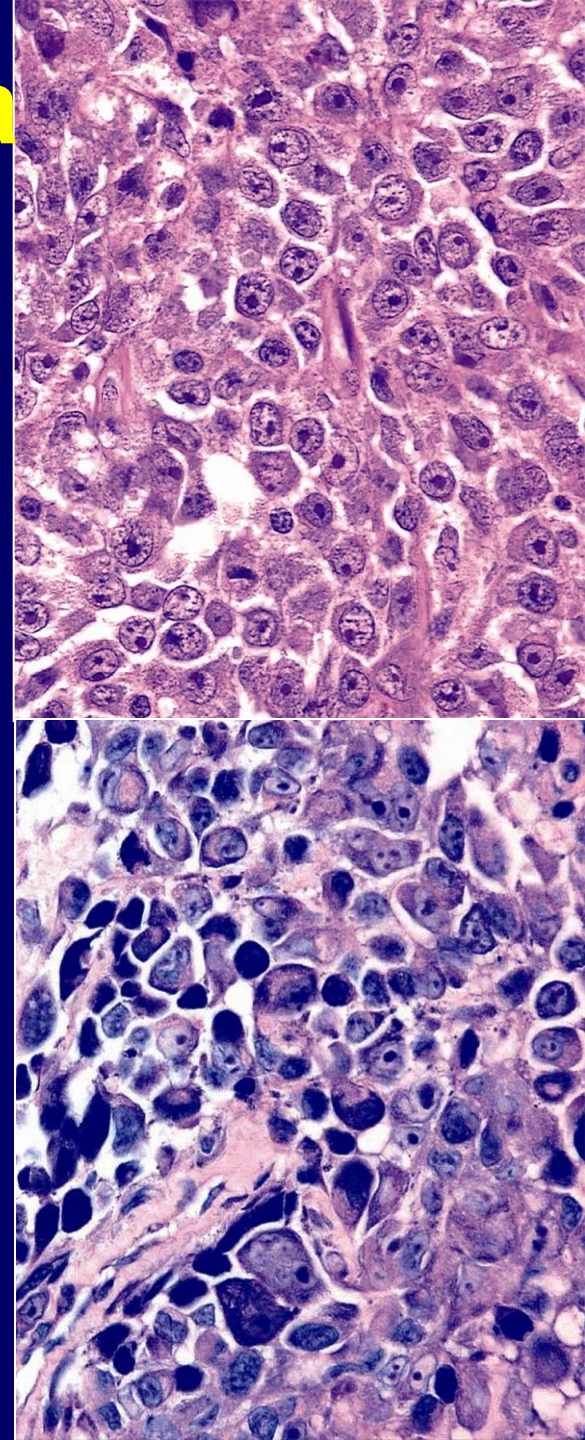
# Localisations gastrique et duodénale d'une prolifération plasmoblastique

- **Scanner: adénomégalies médiastinales, splénomégalie nodulaire, multiples nodules parenchymateux pulmonaires, épanchement pleural bilatéral**
- **Une cure de R CHOP**
- **Décès à J12 dans un tableau de SAM**



# Plasmablastic Lymphoma

- WHO: Diffuse proliferation of large neoplastic cells most of which resemble B-immunoblasts but in which all tumor cells have the immunophenotype of plasma cells
- Category includes cases with and without morphologic plasmacytic differentiation (latter originally described in the oral cavity in HIV+ patients)





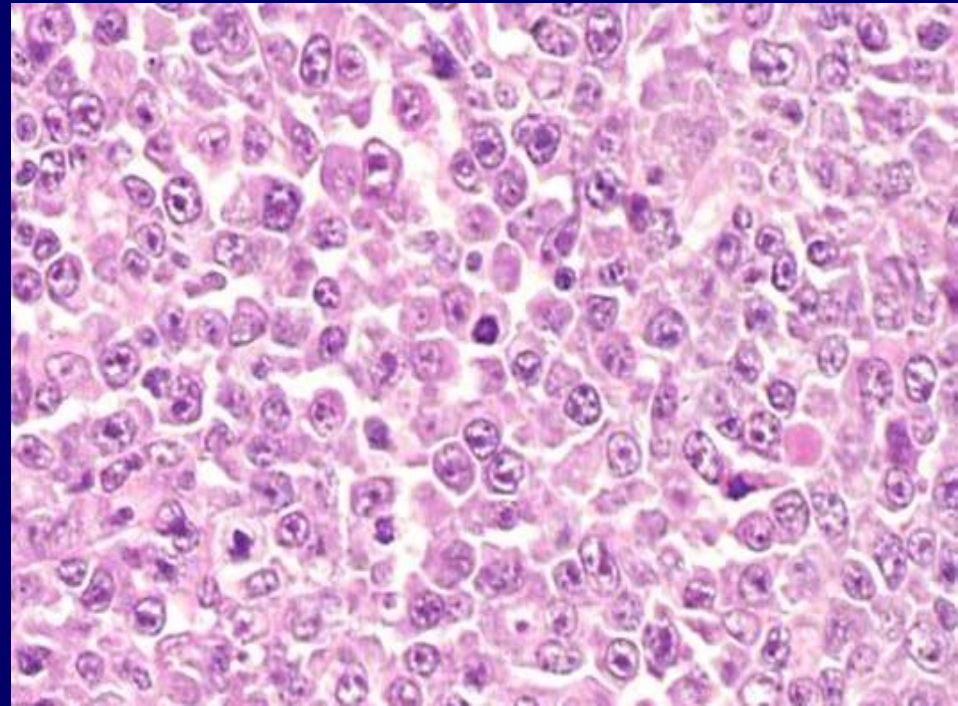
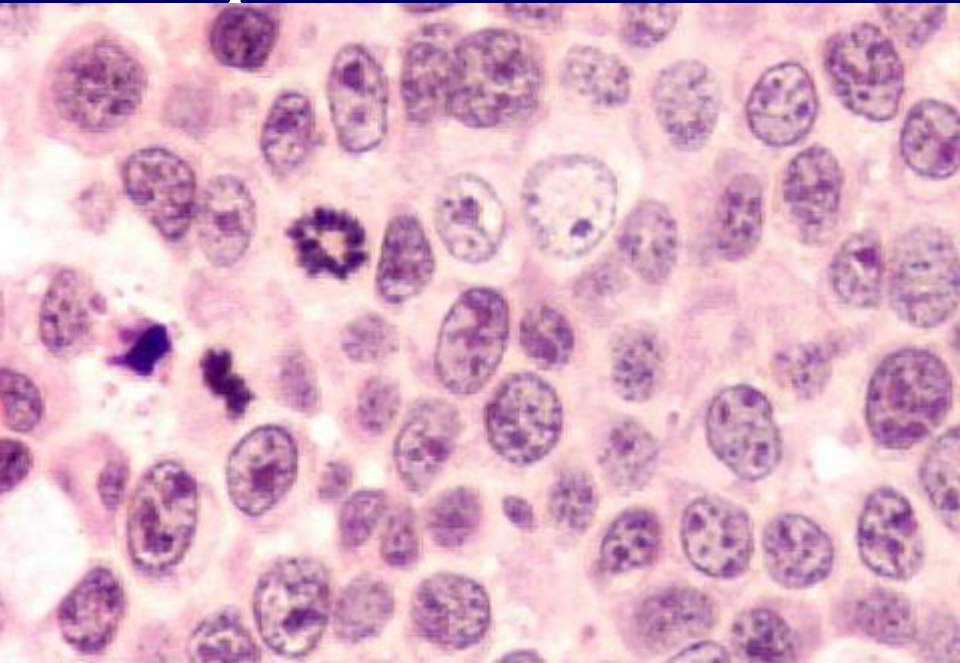
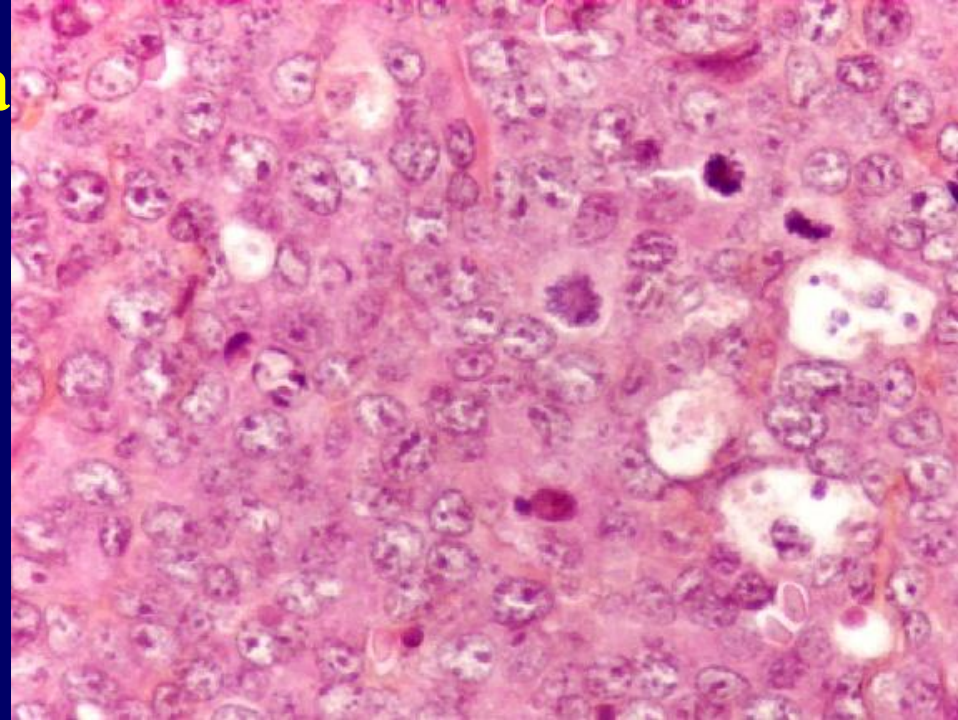
# Plasmablastic Lymphoma

- Uncommon, 50 years (broad distribution)
- Etiology : immunodeficiency : HIV+++ , iatrogenic (autoimmunity disease, post transplant), elderly
- Cells EBV+ (majority of patients)
- Oral cavity++, sinonasal cavity, orbit, skin, bone, digestive tract, lymph nodes (rare, HIV-)
- Stage III or IV; IPI: high risk score
- Very aggressive : death < 1 year



# Plasmablastic Lymphoma

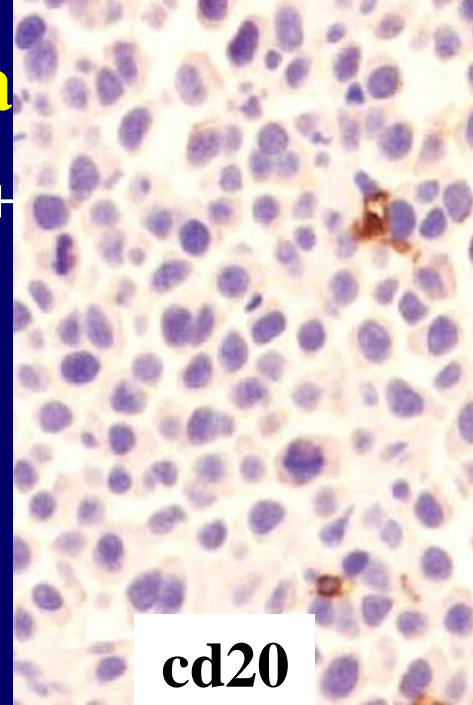
- Morphological spectrum varying from IB to cell with plasmacytic differentiation which resemble plasmablastic plasma cell myeloma
- Frequent mitosis



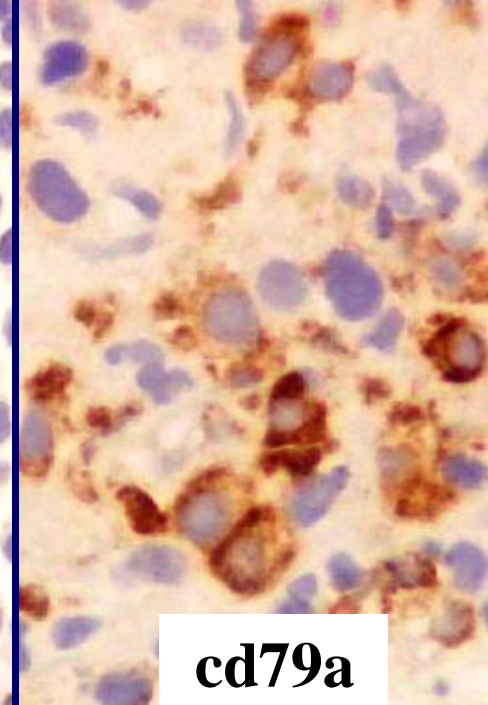


# Plasmablastic Lymphoma

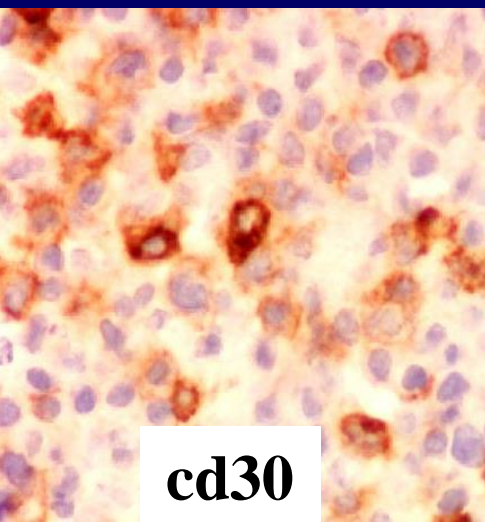
- cd45 - , cd20 - , cd79a  $\pm$  , cd138+  
cd30  $\pm$  , EMA  $\pm$  , Ig+
- Genotype B
- Often EBV+ : (100% if HIV)  
(EBER+, LMP1 - /+), HHV8 -
- *Differential diagnosis:*
  - DLBCL / BL
  - reactive plasmocytosis



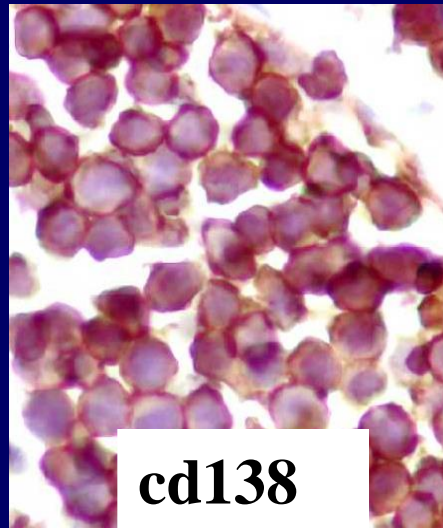
cd20



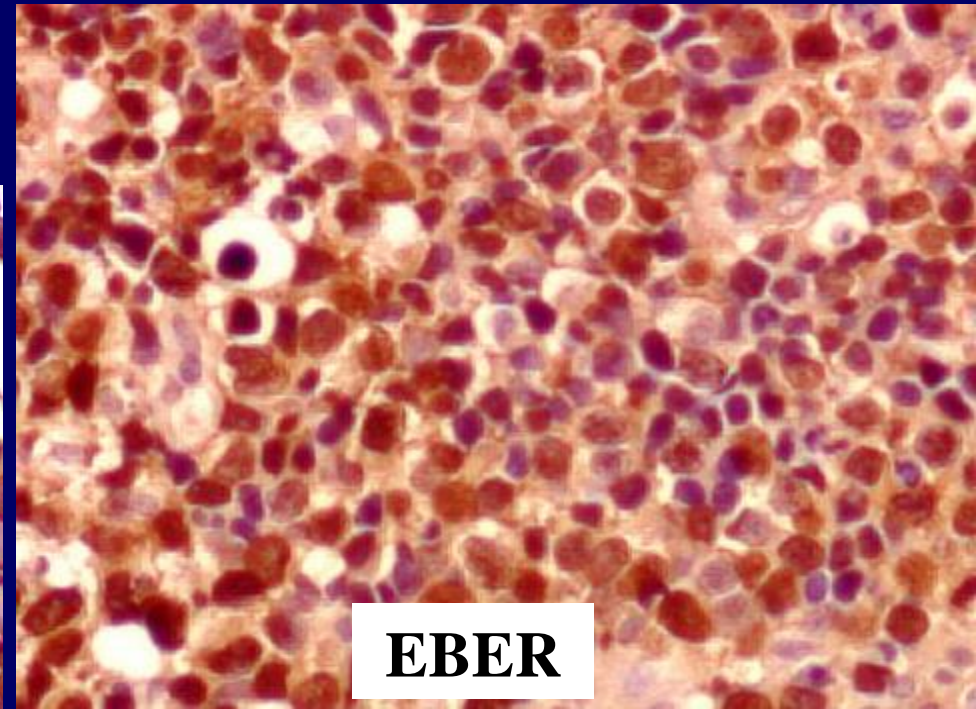
cd79a



cd30

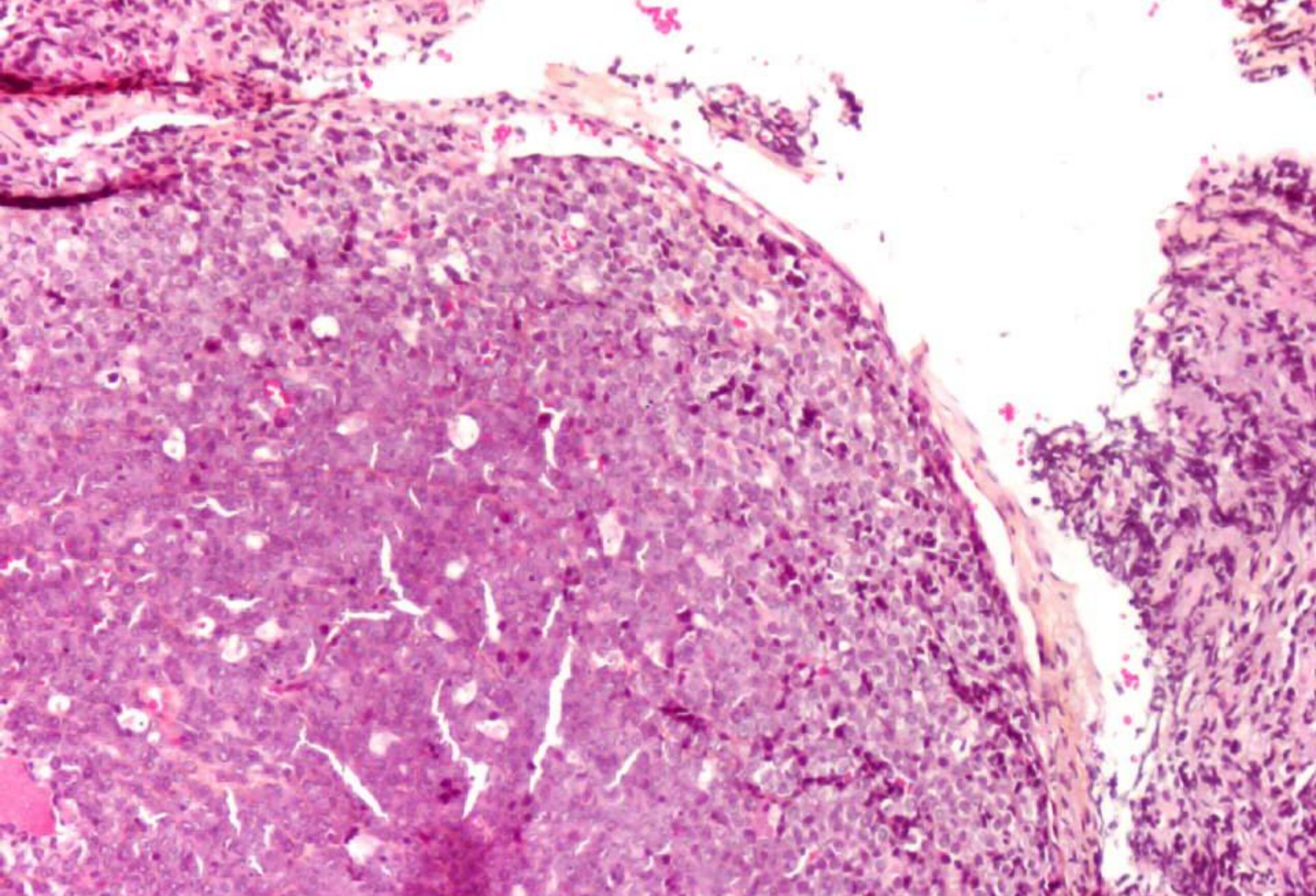


cd138



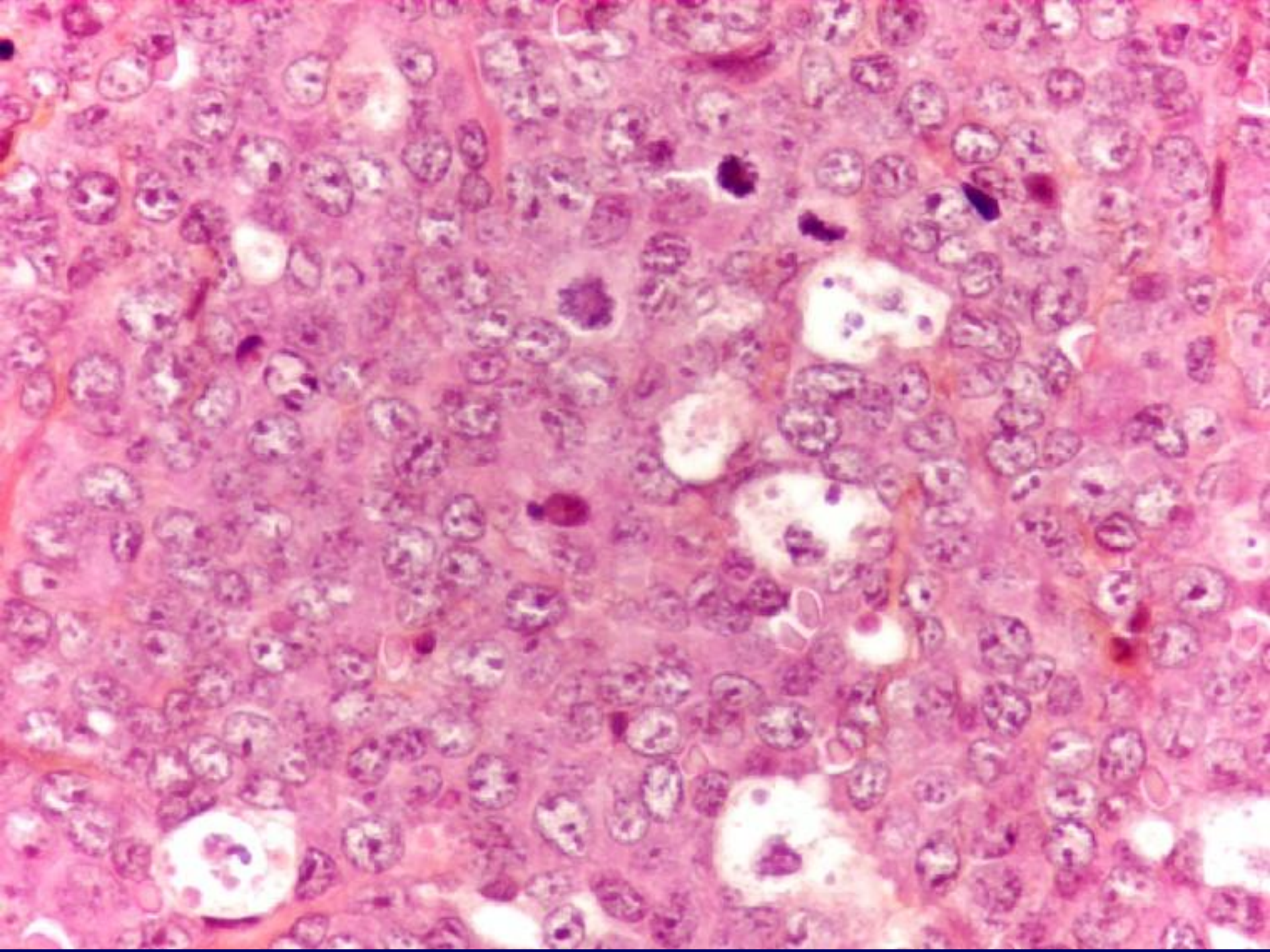
EBER



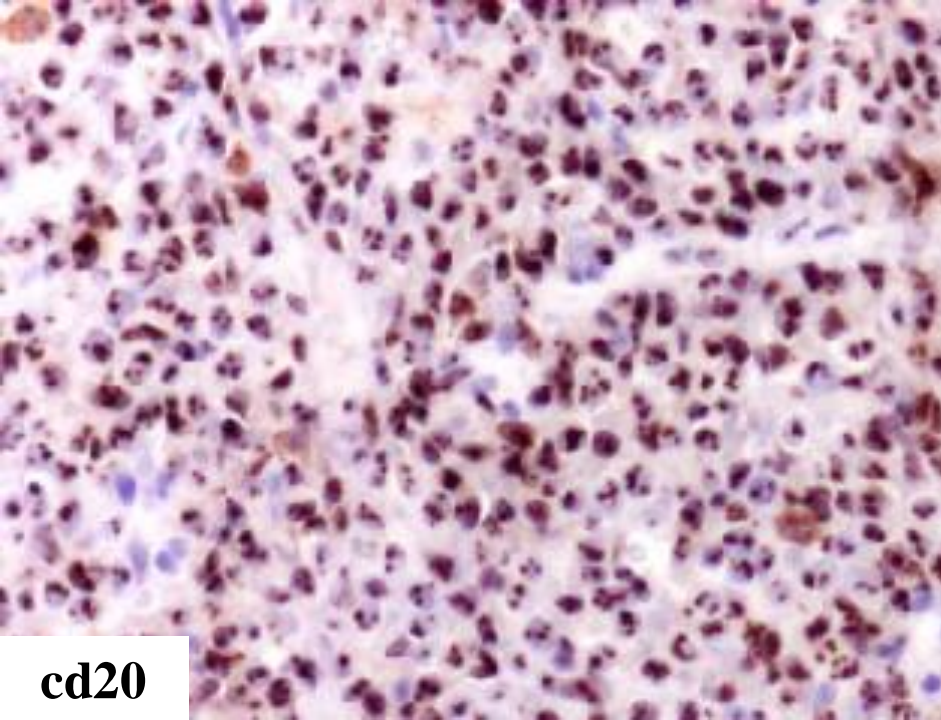


**M, 39 ans, HIV+, cavum tumor**

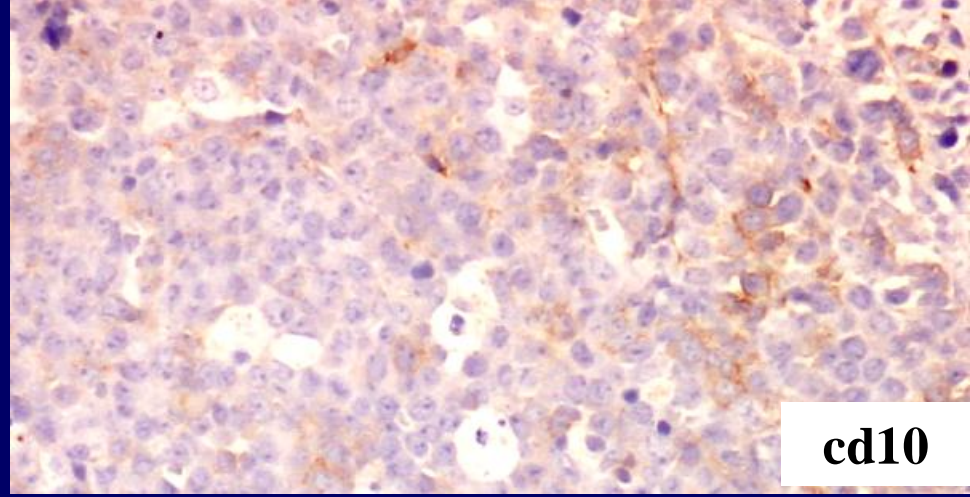




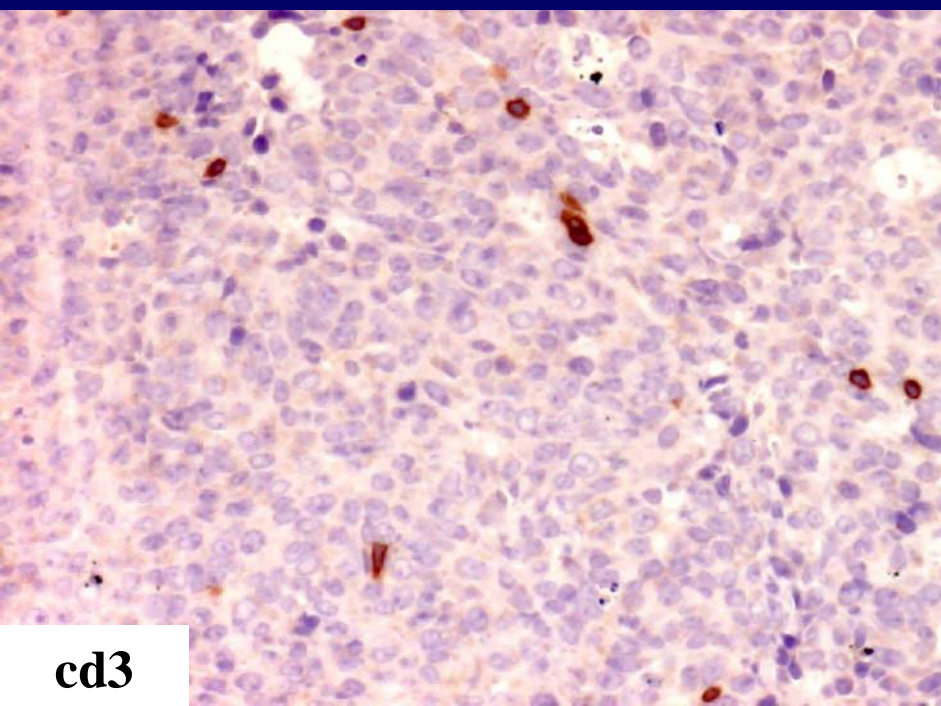




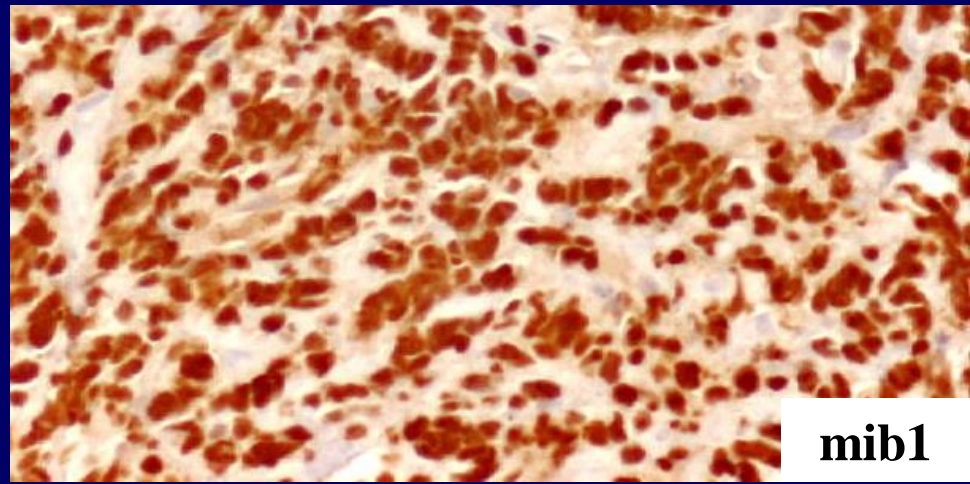
**cd20**



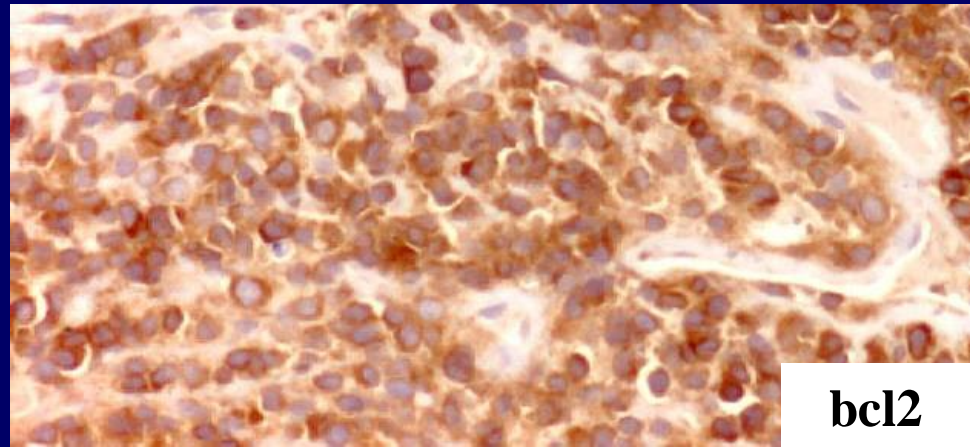
**cd10**



**cd3**

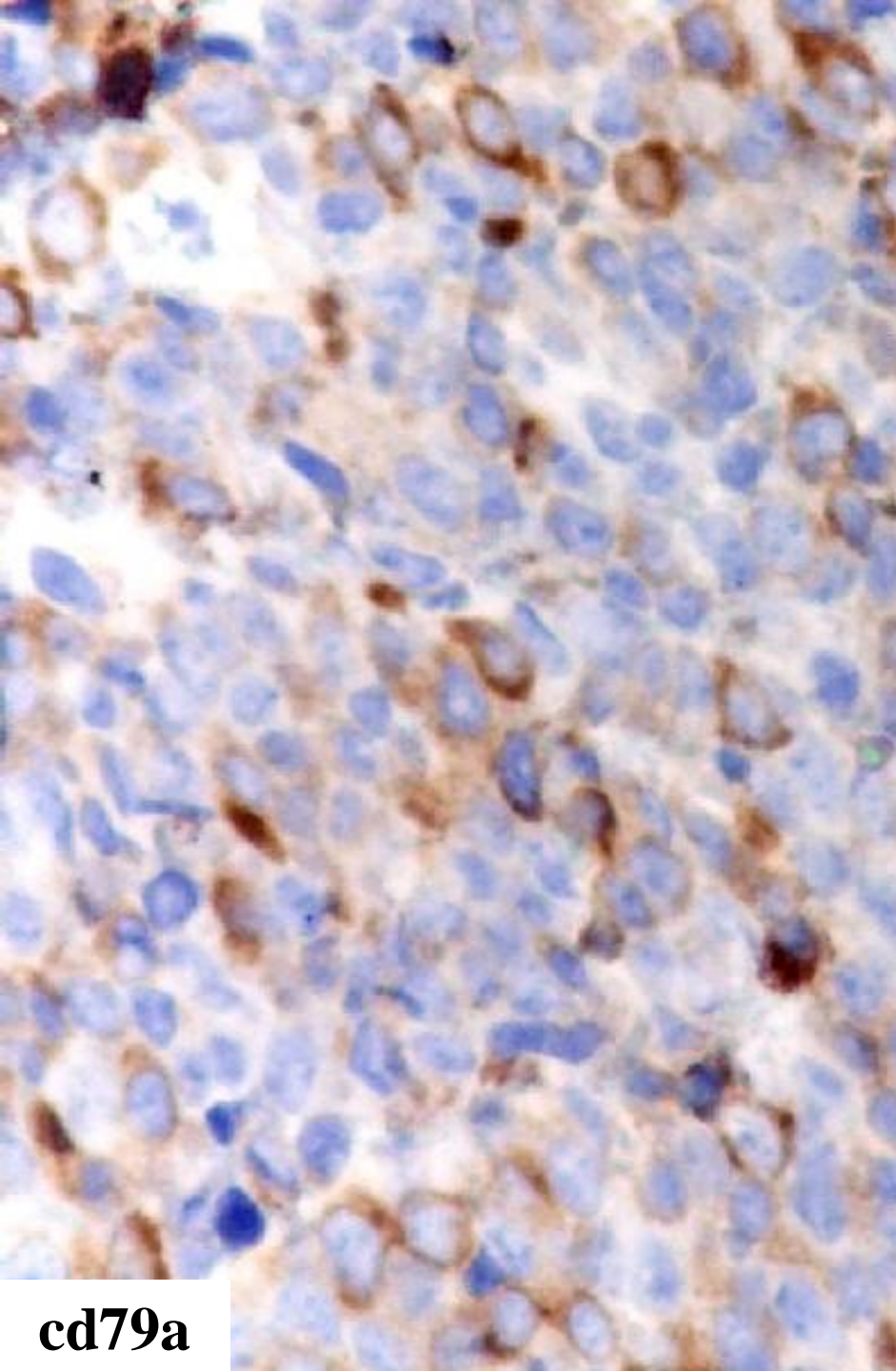


**mib1**

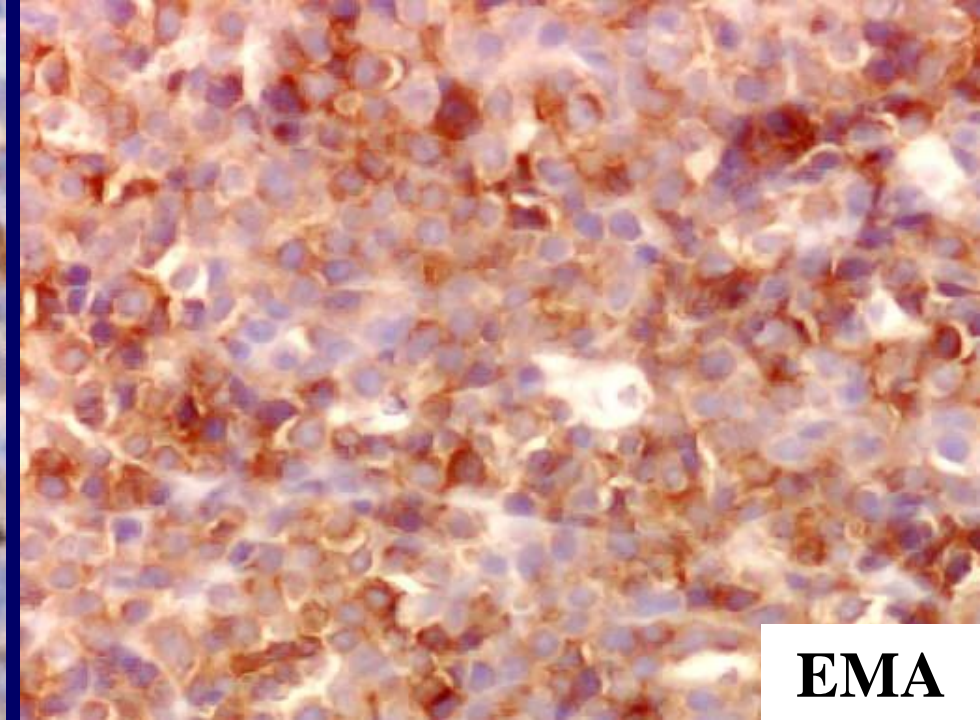


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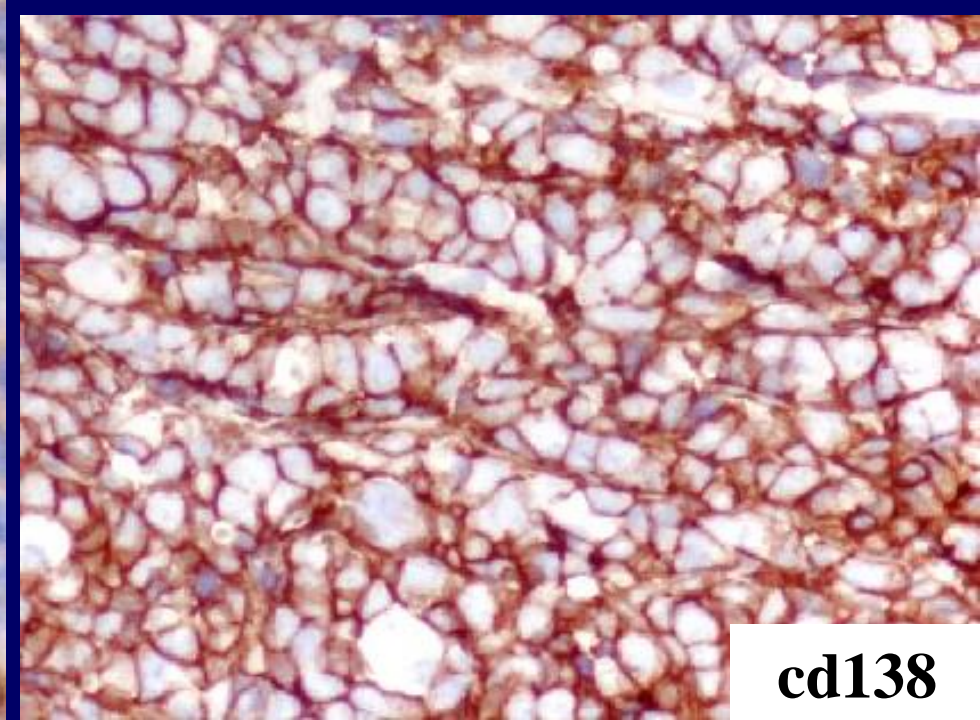




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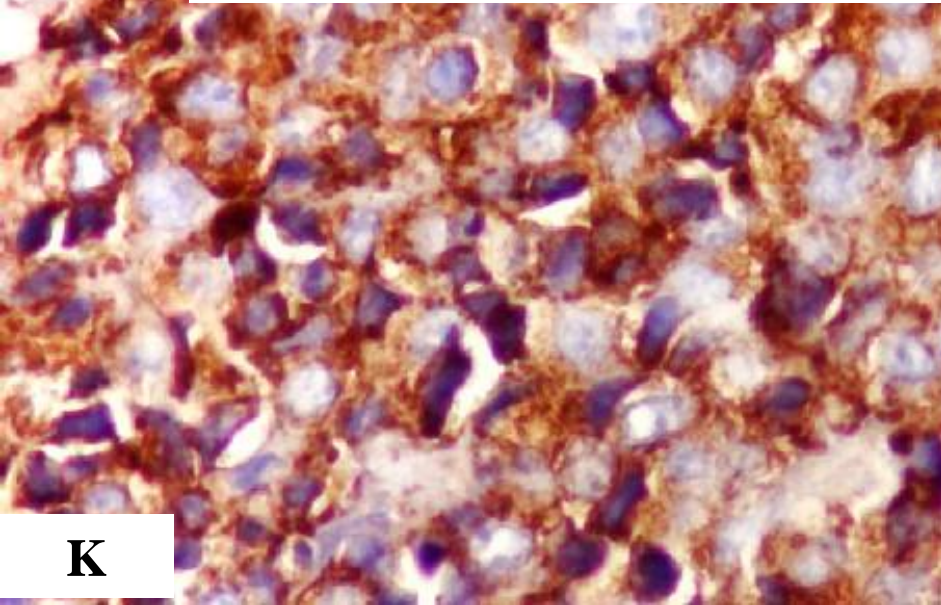
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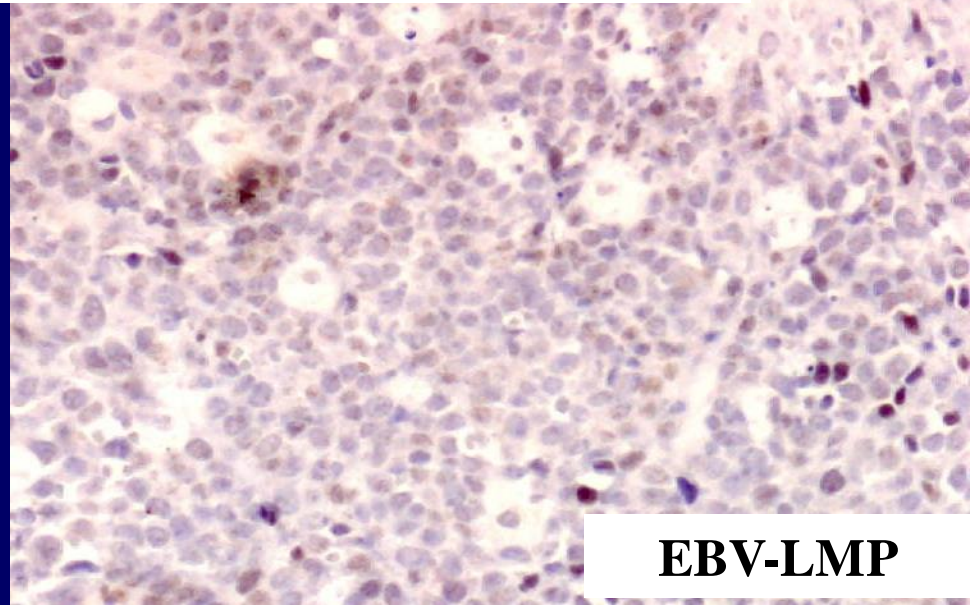
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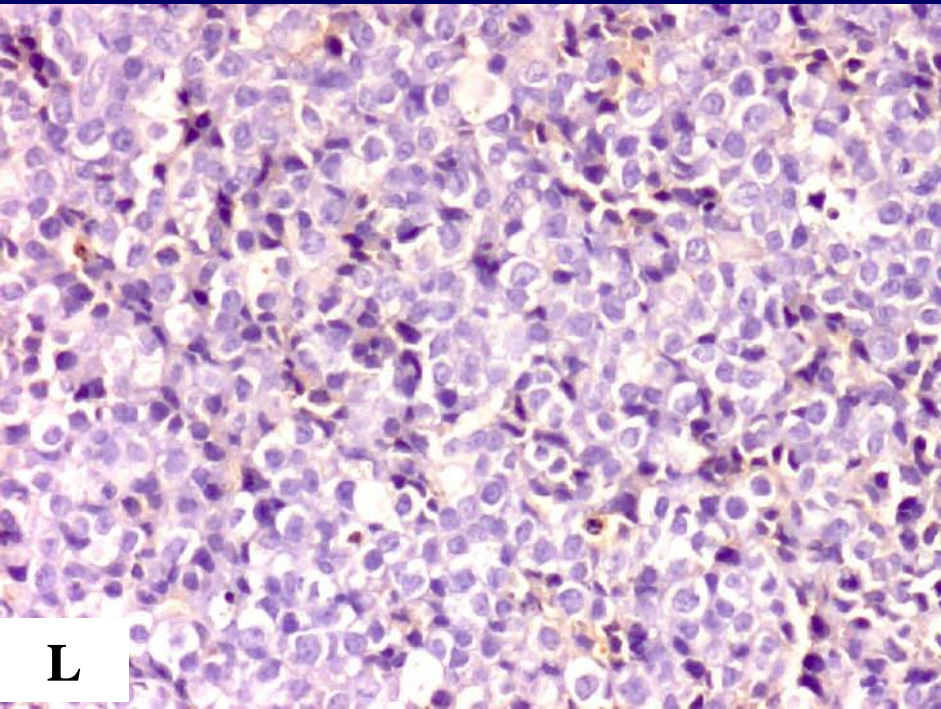
# Plasmablastic lymphoma, HIV+



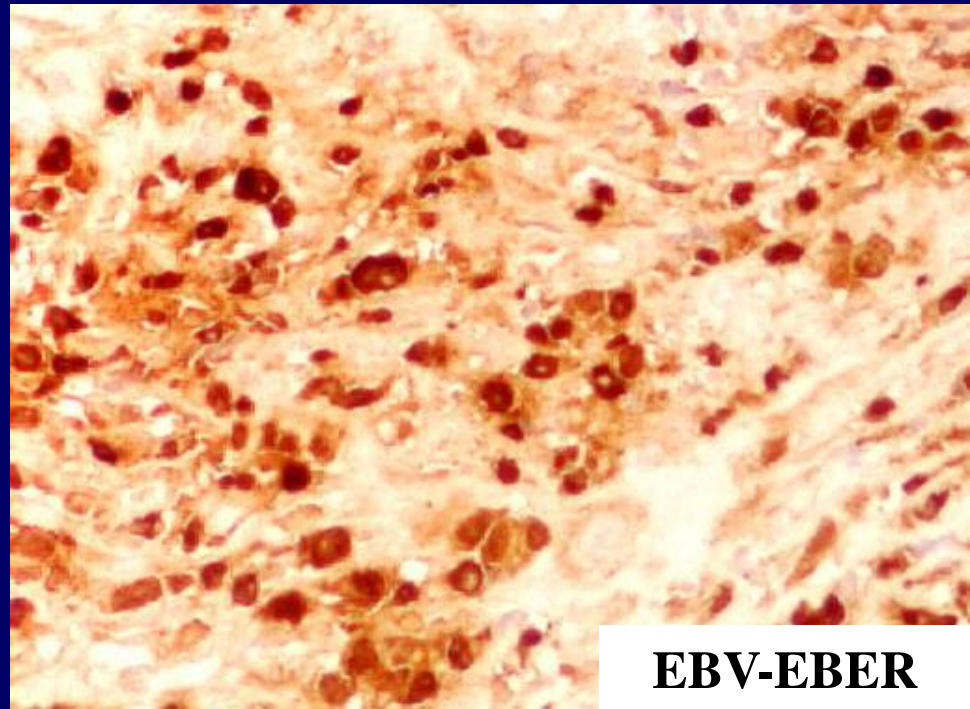
**K**



**EBV-LMP**



**L**



**EBV-EBER**



# **Proliférations Plasmocytaires**

## ***Diagnostic anatomopathologique***

**Importance++ du contexte clinique,  
biologique, radiologique**

- **Plasmocytome solitaire de l'os (*cd56 - , D1 -*)**
- **Plasmocytome extra-osseux: *exclure lymphome du MALT à différenciation plasmocytaire***
- **L plasmoblastique (*mib1, cycline D1 -*) : HIV++, immunodéprimés, EBV, ORL**
- **Localisation extra-osseuse d'un myélome (*cd56 +, cycl D1 +*)**
- ***Lymphome lympho-plasmocytaire***