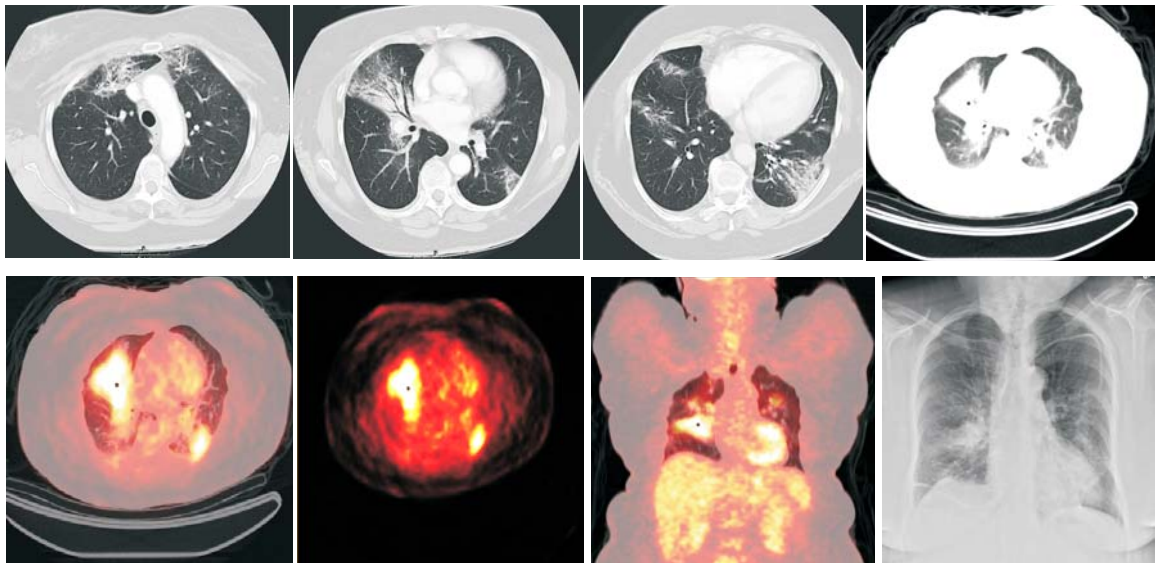


Radiological Diagnosis

Diagnosis of the case presented in the previous edition

J Bras Pneumol 2005;31(6):567.

PERIPHERAL T-CELL LYMPHOMA WITH PULMONARY INVOLVEMENT



67-year-old female patient with dyspnea for 3 months.
Reports a palpable abdominal mass.

COMENTÁRIOS

According to the WHO classification, lymphomas are divided into T-cell non-Hodgkin's lymphomas, B-cell non-Hodgkin's lymphomas and Hodgkin's disease. The T-cell non-Hodgkin's lymphomas may be peripheral or central.

Peripheral T-cell lymphomas (PTCLs) are more common in oriental countries, accounting for 25% of all non-Hodgkin's lymphomas in Korea. They can be classified as:

- Extranodal nasal T-cell lymphoma
- T-cell lymphoma concomitant with enteropathy
- Subcutaneous panniculitis-type T-cell lymphoma
- Fungoid mycosis/Sezary syndrome
- Anaplastic, cutaneous or disseminated large cell

lymphoma

- Hepatosplenic T-cell lymphoma
- Angioimmunoblastic T-cell lymphoma
- Nonspecific peripheral T-cell lymphoma

Most PTCL cases are aggressive, and the prognosis is poor. The case presented is that of a nonspecific peripheral T-cell lymphoma, with nodal abdominal involvement (palpable mass) and pulmonary alterations. Prognosis is poor, and five-year survival is low. Positron emission tomography is of great value in disease staging, treatment control, detection of recurrence, and restaging, especially when coupled with computed tomography.

DANY JASINOWODOLINSKI; GUSTAVO DE SOUZA PORTES MEIRELLES; NESTOR L MÜLLER
Fleury Center for Diagnostic Medicine, São Paulo, São Paulo, Brazil; Universidade Federal de São Paulo (UNIFESP, Federal University of São Paulo), São Paulo, São Paulo, Brazil, University of British Columbia, Vancouver, British Columbia, Canada

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READER(S) CORRECTLY DIAGNOSING THE CASE PRESENTED IN THE NOVEMBER/ DECEMBER 2005 ISSUE

Ednei P. Guimarães - Hospital Júlia Kubitschek - Belo Horizonte - MG

Munira Martins de Oliveira - Hospital Júlia Kubitschek - Belo Horizonte - MG

Ricardo Domingos Delduque - Hospital Padre Albino - Catanduva - SP

Rogério Lima Duarte - Hospital Emilio Carlos - Catanduva - SP

Winston Hidekazu Akashi Iwauchi - Hospital São Luiz - São Paulo - SP