Blastoid variant as an initial presentation of mantle cell lymphoma (MCL)

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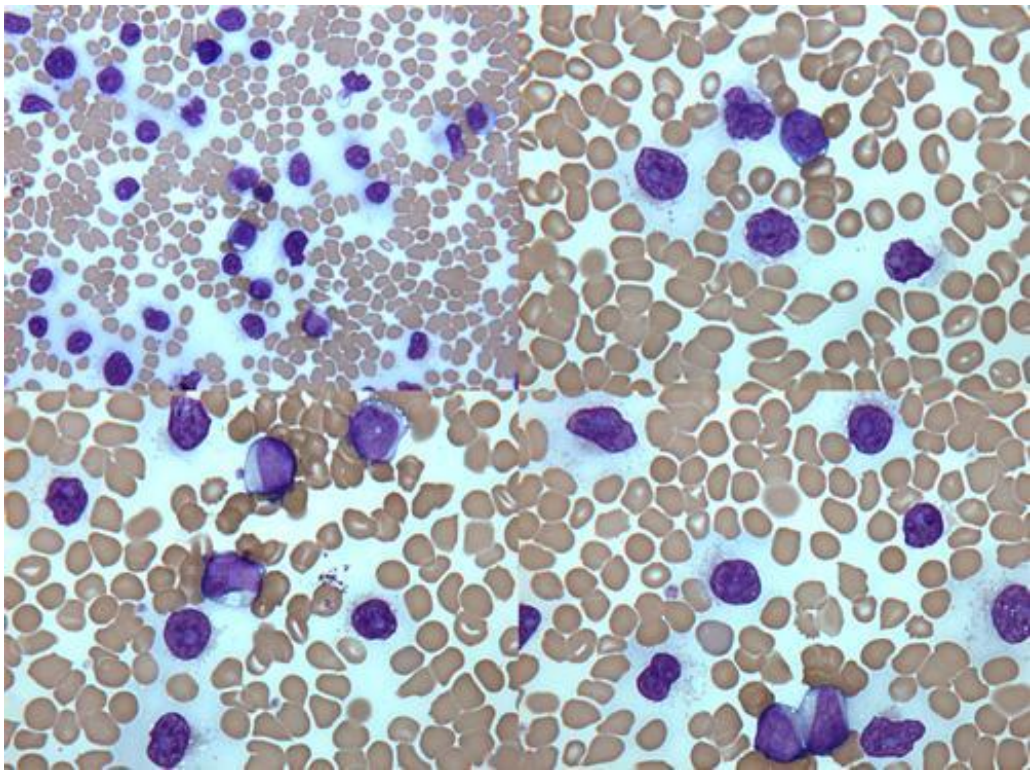

Figure 1: CAPTION

A 68 year old male was referred with recent onset of lymphoid cell leucocytosis. Peripheral blood film revealed the presence of markedly heterogeneous population of abnormal lymphoid cells that are in general of medium size, high N/C ratio, nuclei with irregular margin, clumped chromatin and single large conspicuous nucleolus and slightly basophilic cytoplasm that contain vacuoles. There were a large number of bare nuclei with condensed chromatin, otherwise, many of the intact lymphoid cells appeared with more open chromatin and could be confused with lymphoblasts.

Flow cytometry analysis demonstrated that these were mature clonal B-lymphoid cells with strong expression of lambda light chain restriction and positive for CD5, CD19, CD20, CD22, CD79b and FMC-7 and negative for CD10, CD23, CD43 and CD200.

Following these results, a FISH study for t(11;14)(q13;q32) was carried out which confirmed the presence of this translocation and the diagnosis of a blastoid variant of MCL was issued.

A differential diagnosis in this case is that of B-PLL, which share many of the morphological features and could have the same immunophenotypic profile. However, the presence of cellular pleomorphism was the clue for the diagnosis of MCL which was confirmed by finding the typical gene dysregulation.