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An Unwonted Clinicopathological Subtype of Thyroid Primary Lymphoma

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Abstract
Primary thyroid lymphomas account for less than 5% of all thyroid malignancies and the majority of cases concern non-Hodgkin's lymphoma of B and T-cell origin as well as Hodgkin's lymphoma. Mucosa-associated lymphoid tissue (MALT) lymphoma are a relatively recently described subset of low grade B-cell non-Hodgkin's lymphoma representing between 6 and 27% of the patients with thyroid lymphomas. These cases occur usually in patients with Hashimoto's thyroiditis having a long indolent course and delayed diagnosis, actually benefit from several therapeutic opportunities among them even surgery and a favorable prognostic. Herein we present a 42-year-old female admitted in our unit for a right firm sensitive thyroid swelling, nonhomogeneous on ultrasound images. FNAB showed cellular smears of mixed follicular cells on a background of mature lymphocytes displaying some nuclear atypia and scanty cytoplasm but no definite malignant elements. Intraoperatively, in addition to the "banal" goiter that was found, some sub-centimeter cervical lymph nodes were evidenced. Frozen section showed no evidence of malignant or even suspected cellular elements. However a total right lobectomy and lymph node excision was performed. Microscopy revealed a diffuse lymphoproliferative infiltrate in a background of lymphocytic thyroiditis suggesting a diagnosis of B-cell lymphoma of MALT type and the patient was referred to chemotherapy. She was currently under follow-up without recurrences or metastases after two years from surgery.
Key words: thyroid lymphoma, mucosa-associated lymphoid
tissue lymphoma