Concomitant Hodgkin’s Lymphoma and Gastrointestinal Stromal tumor (GIST): A Rare Coincidence

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Case Report

A 31 y/o healthy female who presents with a three week history of a constant left upper quadrant abdominal pain radiating to the left flank. A week later she developed a sharp right upper quadrant abdominal pain, associated with nausea. Physical examination revealed mild tenderness in mid-epigastric, right and left upper quadrants. Initial labs revealed a normal WBC count, but with neutrophilia, and a mildly elevated lipase at 97. Amylase and liver function tests were unremarkable. Subsequently, an abdominal CT was obtained which revealed a normal appearing pancreas and multiple enlarged lymph nodes with the largest measuring 2.8x1.9cm superior to pancreas.

An endoscopic ultrasound was performed which revealed a normal appearing pancreas, two abnormal lymph nodes in the periarcadic region/GE junction (Figure 1a), one large abnormal lymph node in the mid paraesophageal mediastinum (Figure 1b), and one medium-sized submucosal mass arising from the wall of the stomach (Figure 2). FNA of the lymph nodes and of the submucosal gastric mass was performed.

Pathology of all the lymph nodes revealed lymphoid tissue containing large pleomorphic cells, including diagnostic Reed-Sternberg cells, within a background of predominantly small lymphocytes, consistent with classical Hodgkin’s lymphoma. Pathology of the submucosal gastric mass revealed a spindle cell neoplasm, positive for CD117 (C-Kit) and CD34, consistent with gastrointestinal stromal tumor (GIST). Patient was referred for chemotherapy for treatment of Hodgkin’s lymphoma followed by, surgical resection of the GIST.

Discussion

Gastrointestinal stromal tumors (GIST) are a broad category of mesenchymal, non-epithelial primary tumors of the digestive tract. Most GISTs arise from the stomach (50–62%), the small intestine (20–30%), the colon (11%) and the rectum (7%), while the esophagus is rarely involved (0.6–1%). They also have been found in others locations such as the omentum, mesentry and retroperitoneum.

A literature review reveals that about one-third of GISTS are discovered incidentally. Synchronous occurrence of GISTs and other primary neoplasms is not uncommon. Among these primary neoplasms, epithelial tumors of the gastrointestinal tract are the most common.

Background

* Gastrointestinal stromal tumor (GIST) is the most common mesenchymal tumor of gastrointestinal (GI) tract.

* Many cases of synchronous or asynchronous GIST with other tumors have been reported.

* We believe this is the first reported case of concomitant occurrence of Hodgkin’s lymphoma and GIST.

Conclusion

* It is not clear whether this is a simple incidental coexistence or if the two lesions are connected by a causal relationship.

* Gene mutations may underlie tumor predisposition in patients harboring a dual neoplasia. However, at present, data is limited, and further investigation is warranted.

* Physicians are advised to be alert against possible primary GIST accompanying other tumors.

References

