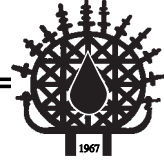


# Images in Haematology

Edited by: Hamdi Akan M.D.



A 55 years old female patient was admitted to the hospital with multiple lymphadenopathies on the servical region. Other physical findings revealed no pathology. Sedimentation rate was 55 mm/h and LDH was high. Bone marrow aspiration biopsy was normal and she was diagnosed as stage II diffuse large cell lymphoma. Imaging techniques revealed no other pathology. She received 3 courses of CNOP (Cyclophosphamide, Mitoxantrone, Vincristine, Prednisolone) but after the initial regression of the lymph nodes, she was found to have a 4 x 4 cm, firm lymph node at the same region. She was accepted as primary refractory malign lymphoma and MINE (Ifosfamide, Mesna, Etoposide, Mitoxantrone) was initiated. Before the third course of MINE the lesion was 5 x 6 cm in size and there was large necrotic areas on the surface of the lesion. DHAP (Cytosine arabinoside, Etoposide, Mitoxantrone, Dexamethasone) was started and CD20 was found to be positive. The patient was lost to follow-up before the third course of DHAP.

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