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## **Hodgkin lymphoma**

Hodgkin lymphoma, also known as Hodgkin's lymphoma or Hodgkin's disease, is a type of lymphoma, in which cancer originates from white blood cells called lymphocytes.

It is characterized by the presence of Reed-Sternberg cells, which are abnormal B lymphocytes that are typically found in the lymph nodes affected by the disease.

HL usually begins in the lymph nodes in the neck or chest and can spread to other parts of the body. The disease may be either classical Hodgkin lymphoma (cHL) or nodular lymphocyte-predominant Hodgkin lymphoma (NLPHL).

The symptoms of HL can include painless swelling of lymph nodes, fever, night sweats, fatigue, weight loss, and itching. In some cases, HL can cause pain in affected lymph nodes after drinking alcohol.

Treatment options for HL depend on the stage of the disease, the patient's age and overall health, and other factors. Treatment may include chemotherapy, radiation therapy, targeted therapy, or a combination of these approaches. In some cases, stem cell transplantation may be recommended. With appropriate treatment, many people with HL are able to achieve remission and go on to live long, healthy lives.

Lymphocyte-depleted Hodgkin's lymphoma is the rarest form of classical Hodgkin's lymphoma, accounting for < 1% of all cases.

Kasper et al., first reported the case of a primary lymphocyte-depleted Hodgkin lymphoma presenting as epidural spinal cord compression. The report, in conjunction with a review of the literature, suggests that surgical intervention is clearly indicated in de novo disease followed by radiotherapy <sup>1)</sup>.

Hodgkin disease with spinal cord compression

Spinal cord or root compression is a rare complication and usually seen in the setting of progressive, advanced disease.

Gupta et al. report 2 cases of Hodgkin disease in pediatric patients who presented with neurologic signs. One patient had paravertebral masses and involvement of thoracic vertebrae, which was initially misdiagnosed as spinal tuberculosis. The second patient who presented with paraplegia and bladder and bowel involvement had an epidural mass with collapse of thoracic vertebra. Lymph node biopsy revealed Hodgkin disease, mixed cellularity in both the cases. Both were treated with chemotherapy followed by radiotherapy <sup>2)</sup>.

1)

Kasper EM, Lam FC, Luedi MM, Zinn PO, Pihan GA. Primary epidural lymphocyte-depleted Hodgkin's lymphoma of the thoracic spine - presentation of a rare disease variant. BMC Neurol. 2012 Aug

3;12:64. doi: 10.1186/1471-2377-12-64. PubMed PMID: 22862748; PubMed Central PMCID: PMC3482592.

2)

Gupta V, Srivastava A, Bhatia B. Hodgkin disease with spinal cord compression. J Pediatr Hematol Oncol. 2009 Oct;31(10):771-3. doi: 10.1097/MPH.0b013e31819c1ff0. PubMed PMID: 19636273.

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