

Secondary central nervous system lymphoma

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Secondary [central nervous system lymphoma](#) (SCNSL) is a type of [non-Hodgkin's lymphoma](#) that originates in the [lymphatic system](#) and spreads to the [central nervous system](#) (CNS), including the [brain](#), [spinal cord](#), and [meninges](#). It is considered secondary because it arises as a result of metastasis from another part of the body, rather than originating in the CNS.

Epidemiology

SCNSL is relatively rare, accounting for about 4% of all primary brain tumors. It most commonly occurs in people with a history of lymphoma, particularly [diffuse large B-cell lymphoma](#), and can occur months or years after the initial diagnosis.

Symptoms of SCNSL can vary depending on the location and extent of the tumor, but may include headaches, seizures, weakness or numbness on one side of the body, changes in vision, and cognitive changes such as confusion or memory loss. Diagnosis typically involves imaging studies such as MRI or CT scans, as well as a biopsy to confirm the presence of lymphoma cells.

Treatment for SCNSL typically involves a combination of chemotherapy and radiation therapy targeted to the CNS. Depending on the extent of the tumor and the patient's overall health, surgery may also be considered. Prognosis for SCNSL can be poor, with a median survival time of only a few months without treatment. However, with aggressive treatment, some patients may achieve remission and long-term survival.

Non-[Primary central nervous system lymphoma](#) is the fifth most common cause of cancer deaths in the U.S.; 63% of new cases are [non-Hodgkin lymphoma](#). Secondary CNS involvement usually occurs

late in the course. Metastatic spread of systemic lymphoma to the cerebral parenchyma occurs in 1–7% of cases at autopsy ¹⁾.

¹⁾

Jellinger K, Radaszkiewicz T. Involvement of the Central Nervous System in Malignant Lymphomas. Virchows Arch (Pathol Anat). 1976; 370:345–362

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