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Title: Chest CT findings in patients with angioimmunoblastic T-cell lymphoma

Dr. Hisako 1341 Kushima hkushi@oita-u.ac.jp MD ¹, Dr. Hiroshi 1342 Ishii hishii@oita-u.ac.jp MD ¹, Dr. Kosaku 1343 Komiya komiyakh1@oita-u.ac.jp MD ¹, Dr. Hiroaki 1344 Oka m10d9007@oita-u.ac.jp MD ¹, Dr. Issei 1345 Tokimatsu issei@oita-u.ac.jp MD ¹ and Prof. Jun-ichi 1346 Kadota kadota@oita-u.ac.jp MD ¹.

¹ Internal Medicine 2, Oita University Faculty of Medicine, Yufu, Oita, Japan, 879-5593 .

Body: Background: Angioimmunoblastic T-cell lymphoma (AILT), a subtype of peripheral T-cell lymphoma, is an aggressive disorder representing approximately 2% of non-Hodgkin lymphomas. Most of the patients with AILT present with pyrexia, weight loss, lymphadenopathy, splenomegaly, skin rushes, and various thoracic involvements. However, there have been few reports of thoracic images in patients with AILT. Objective: To determine the characteristics of the thoracic involvements in AILT. Method: The clinical and radiological data of 7 patients [6 males and 1 female, median age: 74 (65-78) years old] with pathologically-diagnosed AILT between 1998 and 2011 were retrospectively analyzed. Results: The most common manifestations in onset were pyrexia and swelling of the cervical lymph nodes. Radiographic findings of the chest included mediastinal and hilar lymphadenopathy (seen in 7/7 patients), pleural effusion (5/7), thickening of the bronchovascular bundles (5/7), ground-glass opacities (5/7), consolidation (2/7), and pericardial effusion (1/7). Two patients (2/7) developed interstitial pneumonia after chemotherapy-induced remission, and one of the two patients underwent a surgical lung biopsy and showed cellular and organizing interstitial pneumonia. Conclusion: AILT is a rare type of non-Hodgkin lymphoma, however, chest physicians should be aware that thoracic involvements are frequently seen in this disease.