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Primary Gastric Lymphoma: Clinicopathologic Study of Gastric Ly-phoma Casess and the Treatment Option of Choice

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Abstract:

Introduction: Lymphoma may involve the gastrointestinal tract either primarily or as a manifestation of extensively disseminated systemic disease. Stomach being the most frequent site of primary gastroin-testinal lyphoma, followed by the small bowel and colon respectively (1&2&3). For diagnosis of pi-mary small intestinal lymphoma (PSIL), one most satisfies the criteria specified by Dawson and co-workers.(5) Gastric lymphoma is a common presentation of non-Hodgkin's lymphoma. Controversy reigns about many aspects of its classification and management, especially regarding roles for surgical resection. The aim of this study is evaluation of 5 years survival and methods of treatment of primary gastric lymphoma in a group of Iranian patients. Methods: The authors review the clinical features, staging, pathology, prognosis, and management of 30 patients with an emphasis on the role of chemotherapy, surgical resection and radiotherapy of 71 gastrointestinal lymphoma cases. Results: A total of 30 patients (19 male and 11 female) with a mean age of 51 years and a range of 34 - 68 years were included in the study. The frequency of primary gastric lymphoma in our series was 42% of the total of primary gastrointestinal lymphoma. The overall survival rate was 47.8% at 5 years. Stag-ing usually was completed using noninvasive techniques. Patients with stage I or II disease were treated with Surgery (gastric resection) and chemotherapy showed improved Free Disease Survival (FDS) of 67% at 5 years. The fiveyear survival for stage I, II, III and IV patients were 87%, 61%, 25%, and 11% respectively, and the five-year survival for low grade and high grade were 91% and 56%, respec-tively. Stage III or IV and inoperable primary gastric lymphoma were treated with chemotherapy and radiotherapy showed improved Free Disease Survival (FDS) of 67% at five years. The five-year sur-vival for stage I, II, III, IV were 87%, 61%, 25% and 11% respectively, and the five year survival for low grade and high grade were 91% and 56% respectively. Conclusion: Early stage disease and high-grade Lymphoma have a better prognosis and patients who have complete surgical removal of primary tumor and chemotherapy.

Keywords:

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