Long term complication of treatment

- infertility
 - MOPP > ABVD; males > females
 - sperm banking should be discussed
 - premature menopause
- secondary malignancy
 - skin, AML, lung, MDS, NHL, thyroid, breast...
- cardiac disease

A practical way to think of lympho

Category		Survival of untreated patients	Curability	To ti not t
Non- Hodgkin Iymphoma	Indolent	Years	Generally not curable	Gener defer I asymp
	Aggressive	Months	Curable in some	Treat
	Very aggressive	Weeks	Curable in some	Treat
Hodgkin lymphoma	All types	Variable – months to years	Curable in most	Treat

Lab Diagnostic Studies

- Lymph node biopsy
- Bone marrow aspiration and biopsy
- Immunohistochemistry
- Flow cytometry
- Molecular Genetic studies
- FISH
- Cytogenetics

Cytogenetic Lab

- t(14,18) common (about 30%)
 - *Bcl-2*
 - Follicular growth pattern
- t(8,14) ! common in Burkitt's ! *c-myc*
- Multiple anomalies common
- Correlation between cytogenetic char and outcome is variable

FISH analysis of paraffin embedded tissue sections

In the next slide two examples of a lymphoma hybridised with a split-apa probe are shown.

Large cell lymphoma

Case 1



Myc splitapart probe:

Interpretation of results



Signals (even in truncated cells) are fused, excluding a translocation .

Some nuclei contain split s indicating a translocation

Interpretation of results



Signals (even in truncated cells) are fused, excluding a translocation .

Some nuclei contain split s indicating a translocation

FISH analysis of paraffin embedded tissue sections

There are now plentiful examples of how the FISH pro is needed in routine lymphoma diagnosis.

MALT lymphomas with the t(11;18)(q32;q21) translocation: For manual structure of the second structure

"Burkitt-like" lymphomas: Cases suggestive of Burkitt's lymphom atypical features should be analysed by the FISH technique for e of MYC translocation.

What future applications of the FISH technique are like emerge in the future?

One area lies in the detection of chromosomal amplifiand deletions of clinical significance. (CGH)

















Molecular Cytogenetic Lab Recurrent molecular abnormalities in lympho

- t(14;18) / Bcl2 JH in follicular lymphon
- t(11;14) / Bcl1 JH in Mantle Zone lympl
- t(3;14) / Bcl6 JH in Diffuse Large Cell lymphoma
- t(8;14) / cMyc JH in Burkitt lymphoma
- t(2,5) / ALK-NPM in Anaplastic Large Ce Lymphoma

Histology Lab RS cell and variants







classic RS cell

lacunar cell

(mixed cellularity)

(nodular sclerosis)

popcor

(lymphoo predomin