The Early Diagnostic Accuracy for GI T-cell Lymphoma from a Perspective of Gastroenterologists

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Background/Aims: Primary T-cell lymphoma of the gastrointestinal tract is a very difficult disease entity to diagnose but entails extremely poor prognosis. The aim of this study was to determine the early diagnostic accuracy for gastrointestinal T-cell lymphoma by gastroenterologists.

Methods: Between January 2000 and April 2010, the clinical features of 12 patients with primary gastrointestinal T-cell lymphoma including endoscopic findings, radiologic diagnosis, endoscopic biopsy findings, and final diagnosis were retrospectively reviewed.

Results: The most common initial presenting symptoms of primary gastrointestinal T-cell lymphoma was abdominal pain (n=10, 83%). The anatomic location of the primary lesion were found to be small bowel (n=7, 58%), colon (n=4, 33%), and stomach (n=2, 17%). There were no cases of T-cell lymphoma diagnosed by only clinical symptoms, radiologic findings, or endoscopic findings without biopsy. Pathologic confirmation of T-cell lymphoma by endoscopic examination was achieved in only 5 cases (42%) and the remaining cases (n=7, 58%) were finally diagnosed as this disease by pathologic examination after surgery.

Conclusions: All of the patients with primary T-cell lymphoma of the gastrointestinal tract were diagnosed exclusively by endoscopic or surgical pathologic examinations, suggesting that gastroenterologists should scrutinize and suspect this disease with a careful caution in case of atypical gastrointestinal ulcers.

Key Words: Primary gastrointestinal T-cell Lymphoma, Gastroenterologist, Early diagnostic accuracy