CASE REPORT

Protein Losing Enteropathy as a Sole Manifestation of Intestinal Non-Hodgkin's Lymphoma; A Case Report and Review of the Literature

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ABSTRACT

Protein losing enteropathy (PLE) as an initial finding of lymphoma, is extremely rare in childhood. We describe clinical and pathological features of an unusual case of gastrointestinal lymphoma presented with PLE as a sole manifestation. Differential diagnosis in children presenting with PLE is critical because early diagnosis and treatment are important for survival in patients with lymphoma.

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BACKGROUND

Lymphoma is the third most common malignant neoplasm of children.(1-2), Unlike adults in whom the stomach is most often involved, the most common sites in affected children are the distal ileum, secum and appendix.(3), Primary gastric lymphoma of the stomach is extremely rare in childhood.(4), Children with abdominal lymphoma frequently have presenting symptoms of abdominal pain, distention, change of bowel habits, and nausea or vomiting.(5), Protein losing enteropathy (PLE) is an uncommon presentation in children with lymphoma. Edema or hypop-

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roteinemia has not been reported as the initial feature of gasteric lymphoma.(6), PLE is a rare presenting sign in non- Hodgkin's lymphoma (NHL). Differential diagnosis in patients presenting with PLE is critical because early diagnosis and treatment are important for survival in patients with lymphoma. We report an unusual case of PLE, which highlights the matter.

CASE REPORT

A previously healthy 4-year-old boy was referred to our medical center two weeks after the onset of progressive pitting edema. There was no history of fever, diarrhea or vomiting. On physical examination he looked unwell and pitting edema, extended from his ankles to the chest and dorsum of the hands were notable findings. There were