

# BÖLÜM

# 15

## PRİMER KUTANÖZ CD 30+ LENFOPROLİFERATİF HASTALIKLAR

Leyla BAYKAL SELÇUK<sup>1</sup>

### GİRİŞ

Primer kutanöz CD 30+ lenfoproliferatif hastalıkların ayırt edici özelliği, lezyon- dan alınan deri biyopsisinde CD30 eksprese eden atipik T lenfositlerin varlığıdır. WHO/EORTC 2018 sınıflandırmasında primer kutanöz CD30+ lenfoproliferatif hastalıklar; kutanöz T hücreli lenfomalar grubuna dahildir. Bu lenfoma grubu, lenfomatoid papülozis, primer kutanöz anaplastik büyük hücreli lenfoma, transforme mikozis fungoides (MF) ve borderline lezyonları içerir (Willemze vd.2019). CD30 pozitifliği sadece lenfoproliferatif hastalıklara özgü değildir. CD 30 boyanması böcek ısrıkları, ilaç reaksiyonları, enfeksiyonlar ve neoplazi gibi birçok hastalıkta görülebildiği için lenfoproliferatif hastalıkların tanısında klinikopatolojik korelasyon önemlidir (Chen vd.2019).

### LENFOMATOİD PAPÜLOZİS

İlk kez 1968'de Macaulay tarafından tanımlanan LeP, kendi kendine iyileşen papülönodüler veya papülonekrotik deri lezyonları ile karakterize ve atipik T hücrelerinin CD30+ lenfoid proliferasyonu histolojik özelliklerine sahip kronik, tekrarlayan bir hastalıktır (Macaulay, 1968, Martinez-Cabriales, 2020). Herhangi bir yaşta ortaya çıkabilir, en sık 5. dekatta görülür, ırk ayrimı yoktur, yaş ve cinsiyete göre bimodal dağılım mevcut, pediatrik popülasyonda erkek, erişkinlerde ise kadın cinsiyette daha fazla görülür. Yıllık hastalık insidansı milyon kişi başına 1.2-1.9 olarak bildirilmektedir (Wieser vd.,2016, Bekkenk vd., 2000).

<sup>1</sup> Doç. Dr, Karadeniz Teknik Üniversitesi Tip Fakültesi, Deri ve Zührevi Hastalıklar AD, lb\_leyla@hotmail.com

## KAYNAKLAR

- Willemze R, Cerroni L, Kempf W, Berti E, Facchetti F, Swerdlow SH, et al. The 2018 update of the WHO-EORTC classification for primary cutaneous lymphomas. *Blood*. 2019;133(16):1703-14.
- Chen C, Gu YD, Geskin LJ. A Review of Primary Cutaneous CD30+ Lymphoproliferative Disorders. *Hematol oncol Clin North Am*. 2019;33(1):121-34.
- Macaulay WL. Lymphomatoid papulosis. A continuing self-healing eruption, clinically benign-histologically malignant. *Arch Dermatol* 1968; 97: 23– 30.
- Martinez-Cabriales SA, Walsh S, Sade S, Shear NH. Lymphomatoid papulosis: an update and review. *J Eur Acad Dermatol Venereol*. 2020 Jan;34(1):59-73.
- Wieser I, Wohlmuth C, Nunez CA, Duvic M. Lymphomatoid Papulosis in Children and Adolescents: A Systematic Review. *Am J Clin Dermatol*. 2016 Aug;17(4):319-27.
- Bekkenk MW, Geelen FA, van Voorst Vader PC et al. Primary and secondary cutaneous CD30(+) lymphoproliferative disorders: a report from the Dutch Cutaneous Lymphoma Group on the long-term follow-up data of 219 patients and guidelines for diagnosis and treatment. *Blood* 2000; 95: 3653– 3661.
- Kempf W, Kadin ME, Dvorak AM et al. Endogenous retroviral elements, but not exogenous retroviruses, are detected in CD30-positive lymphoproliferative disorders of the skin . *Carcinogenesis* 2003; 24: 301– 306.
- Kim YC, Yang WI, Lee MG et al. Epstein-Barr virus in CD30 anaplastic large cell lymphoma involving the skin and lymphomatoid papulosis in South Korea. *Int J Dermatol* 2006; 45: 1312– 1316.
- Mori M, Manuelli C, Pimpinelli N et al. CD30-CD30 ligand interaction in primary cutaneous CD30(+) T-cell lymphomas: a clue to the pathophysiology of clinical regression. *Blood* 1999; 94: 3077– 3083.
- Wagner G, Rose C, Klapper W, Sachse MM. Lymphomatoid papulosis. *J Dtsch Dermatol Ges*. 2020 Mar;18(3):199-205.
- Toumi A, Fazal S, Litaiem N. Lymphomatoid Papulosis. 2022 Jun 19. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan.
- Kempf W, Kazakov DV, Baumgartner HP, Kutzner H. Follicular lymphomatoid papulosis revisited: a study of 11 cases, with new histopathological findings. *J Am Acad Dermatol*. 2013;68(5):809-16.
- Pileri A, Bacci F, Neri I, et al. Persistent agmination of lymphomatoid papulosis: an ongoing debate. *Dermatology*. 2012;225(2):131-4.
- Fernandez-de-Misa R, Hernandez-Machin B, Servitje O et al. First-line treatment in lymphomatoid papulosis: a retrospective multicentre study. *Clin Exp Dermatol* 2018; 43: 137– 143.
- Saggini A, Gulia A, Argenyi Z, et al. A variant of lymphomatoid papulosis simulating primary cutaneous aggressive epidermotropic CD8+ cytotoxic T-cell lymphoma. Description of 9 cases. *Am J Surg Pathol* 2010; 34:1168.
- Kempf W, Kazakov DV, Schärer L, et al. Angioinvasive lymphomatoid papulosis: a new variant simulating aggressive lymphomas. *Am J Surg Pathol* 2013; 37:1.
- Karai LJ, Kadin ME, Hsi ED et al. Chromosomal rearrangements of 6p25.3 define a new subtype of lymphomatoid papulosis. *Am J Surg Pathol* 2013; 37: 1173– 1181.

- Çetinarslan T, Türel Ermertcan A. CD30+ lenfoproliferatif hastalıklar. Bayramgürler D, editör. Deri Lenfomaları. 1. Baskı. Ankara: Türkiye Klinikleri; 2020. p.42-9.
- Brujin MS, Horváth B, van Voorst Vader PC, Willemze R, Vermeer MH. Recommendations for treatment of lymphomatoid papulosis with methotrexate: a report from the Dutch Cutaneous Lymphoma Group. *Br J Dermatol.* 2015 Nov;173(5):1319-22.
- Wieser I, Oh CW, Talpur R, Duvic M. Lymphomatoid papulosis: Treatment response and associated lymphomas in a study of 180 patients. *J Am Acad Dermatol.* 2016 Jan;74(1):59-67.
- Zic JA. Diagnosis and Management of Cutaneous Lymphomas Including Cutaneous T-cell Lymphoma. *Med Clin North Am.* 2021 Jul;105(4):737-755.
- Moodley N, Nombona P, Mosam A. Primary Cutaneous Anaplastic Large-Cell Lymphoma. *Dermatopathology (Basel).* 2019 Jun 26;6(2):163-169.
- Stoll JR, Willner J, Oh Y, Pulitzer M, Moskowitz A, Horwitz S, Myskowski P, Noor SJ. Primary cutaneous T-cell lymphomas other than mycosis fungoides and Sézary syndrome. Part I: Clinical and histologic features and diagnosis. *J Am Acad Dermatol.* 2021 Nov;85(5):1073-1090.
- Fornari A, Piva R, Chiarle R, et al. Anaplastic large cell lymphoma: one or more entities among T-cell lymphoma? *Hematol oncol.* 2009;27(4):161-70.
- Fernández-de-Misa R, Hernández-Machín B, Combalía A, García Muret MP, Servitje O, Muniesa C, Gallardo F, Pujol RM, Martí RM, Ortiz-Brugués A, Maroñas-Jiménez L, Ortiz-Romero PL, Blanch Rius L, Izu R, Román C, Cañuelo J, Blanes M, Morillo M, Bastida J, Peñate Y, Pérez Gala S, Espinosa Lara P, Pérez Gil A, Estrach T. Prognostic factors in patients with primary cutaneous anaplastic large cell lymphoma: a multicentric, retrospective analysis of the Spanish Group of Cutaneous Lymphoma. *J Eur Acad Dermatol Venereol.* 2020 Apr;34(4):762-768.
- Gao C, McCormack CJ, van der Weyden C, Twigger R, Buelens O, Lade S, Khoo C, Campbell BA, Goh M, McKelvie P, Prince HM. The importance of differentiating between mycosis fungoides with CD30-positive large cell transformation and mycosis fungoides with coexistent primary cutaneous anaplastic large cell lymphoma. *J Am Acad Dermatol.* 2021 Jan;84(1):185-187.
- Martin JM, Wu H, Barta SK. CD30+ T-cell lymphoproliferative disorders. *Chin Clin Oncol.* 2019;8(1):4.
- Yu JB, McNiff JM, Lund MW, Wilson LD. Treatment of primary cutaneous CD30+ anaplastic large-cell lymphoma with radiation therapy. *Int J Radiat Oncol Biol Phys* 2008; 70:1542.
- Prince HM, Kim YH, Horwitz SM, et al. Brentuximab vedotin or physician's choice in CD30-positive cutaneous T-cell lymphoma (ALCANZA): an international, open-label, randomised, phase 3, multicentre trial. *Lancet* 2017.
- Kadin ME, Hughey LC, Wood GS. Large-cell transformation of mycosis fungoides-differential diagnosis with implications for clinical management: a consensus statement of the US Cutaneous Lymphoma Consortium. *j Am Acad Dermatol.* 2014; 70:374.
- Herrmann JL, Hughey LC. Recognizing largecell transformation of mycosis fungoides. *J Am Acad Dermatol.* 2012; 67:665.