

## **MEETING ABSTRACTS**

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# AIDS-related lymphomas in Nigeria an emerging phenomenon

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### **Background**

In comparison to the western world, aggressive non-Hodgkin's lymphoma (NHL) including primary central nervous system (CNS) lymphoma, as AIDS-defining disease, is less common in sub-Saharan Africa even with its high HIV/AIDS prevalence. We studied the occurrence of HIV/AIDS-related lymphomas in Nigerian patients with a view toward highlighting the incidence.

#### Patients and method

Consecutive cases of histologically and/or cytologically confirmed lymphoma screened for HIV (after appropriate counseling) and seen between January 2003 and December 2009 were the subjects. Types and treatment outcome of lymphoma in the HIV-positive group were further studied. Data were analyzed using appropriate descriptive and inferential statistics.

#### **Results**

There were 161 cases comprising NHL, 42 (25.5%); HL, 15 (9.3%), and BL, 104, (64.6%). Seven (4.3%), aged 2-49 (median = 41) years were retroviral positive. Of these, 4 (3 males, 1 female, aged 28-49 (median = 38.5) years) had NHL, 2 (both females) HL, and 1 case, a 2-year-old boy with HIV since birth, had Burkitt's and an HIV-positive mother. All, except one female with stage 1 HL, presented late (at least clinical stage IIIb). Three patients with NHL and 1 with late-stage HL succumbed to their disease within 1-3 weeks of hospital admission. The remaining 3 patients had been responding satisfactorily

to chemotherapy (CHOP for NHL, ABVD for HL, and COM for Burkitt's lymphoma.)

#### Conclusion

Compared to earlier reports from Nigeria, the AIDS-related lymphomas rate of 4.3% in the series indicated rising incidence. AIDS-associated BL of 0.1%, in spite of high background prevalence of Burkitt's lymphoma (>60% of lymphomas), supported its relative rarity. With longer survival and longer immunosuppression, closely following up AIDS patients on HAART would be justified, as more cases of AIDS-related lymphomas may possibly emerge in the future.

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