



**SYMPOSIUM ON LYMPHOMAS**

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**MALIGNANT LYMPHOMAS IN EGYPT**

by

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Malignant lymphomas are relatively a common neoplasm in Egypt. They are the second common cause of cancer after bladder neoplasms. Table 1 shows the relative incidence of lymphomas during the last six years among patients referred to the Radiotherapy Department at Cairo University Hospital. The relative incidence varied between 11-15%.

It is not only the prevalence which characterises our group of lymphomas, but also the relative incidence of its subgroups. While Hodgkin's disease is the commonest in Western countries, Reticulum cell sarcoma is as common as or even more prevalent among our lymphomas (Aboul Nasr 1960 and Kamel 1974). In a pilot survey of all cases seen at our Institute during the years 1971-1972, I came to these findings: Among the 152 cases histologically confirmed cases of lymphomas, fifty-eight (38%) are Hodgkin's disease and equal number are R.C.S. cases (see Table 2).

Age Incidence: The analysis of this series shows the presence of two peaks of age incidence, one below the age of twenty years (32.9% of cases) and another peak between 40-60 years (36.8% of cases), Table 3. Table 4 shows clearly that Hodgkin's disease is responsible for the first peak and R.C.S. for the second one.

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Sex: In this series of patients the male to female ratio is 3:1.  
No explanation can be suggested.

Abdominal lymphomas: Although there is a lot of discussion nowadays about the presence of a special group of lymphomas which deserves to be a special entity, i.e. Mediterranean lymphoma, yet there is no clear definition of its main characteristics, either epidemiologically or clinically. Would this disease include lymphomas of gastrointestinal tract alone or all lymphomas presenting primarily with abdominal disease? It will be very interesting to hear my colleagues' opinion in this respect.

In view of the lack of detailed information in some of our case records, I consider all cases presenting primarily with abdominal disease as abdominal lymphoma. Although this is a very empirical way, yet it will throw some light on the problem. Among the histologically confirmed cases, thirty-six cases (23.6%) are considered abdominal lymphoma. Their main clinical presentation was as follows:

multiple abdominal masses	18 cases
Splenomegaly	8 cases
Hepatosplenomegaly	8 cases
Intestinal obstruction	2 cases

Age Incidence: In contrast to lymphomas in general, abdominal lymphomas showed one age peak incidence between 40-60 years, Table 5. This can be explained if we look into Table 6 showing the classification of abdominal lymphomas according to their histology.

It is evident that R.C.S. is the most common type (24/36), and hence the presence of one peak at 40-60 years.

Sex Incidence: In contrast to lymphomas in general, females are affected as common as males by abdominal disease, Table 6.

In conclusion, one can say that malignant lymphomas in general represent a major group of neoplasms in any big radiotherapy centre in our country. In spite of lack of valid national statistics, yet there is sufficient clinical evidence that abdominal lymphomas may represent about 25% of all cases of lymphomas. Surgeons, pathologists and radiotherapists should be more aware

of this problem in our countries and good epidemiological surveys on a national or regional level are highly recommended. Once again, one cannot stop thinking of any relationship between heavy parasitic intestinal infestation and R.C.S. of abdomen. The collaboration of many disciplines in medicine is highly required.

References: Aboul Nasr, A.L.: Special Report, NAMRU 3, Cairo 1960  
Kamel, I. 1974: Personal communication

Table 1

Year	Total number of neoplasms	Number of lymphomas	Percentage
1967	2273	356	15
1968	2554	388	15
1969	2891	382	13
1970	2106	239	11
1971	1834	244	13
1972	1733	256	15

Table 2

Total number of cases	334	Percentage
No. of cases confirmed histo- logically	152	45
Hodgkin's disease	58	38
R.C.S.	58	38
Lymphosarcoma	32	21
G.F.L.	4	3

Table 3

<u>Age group in years</u>	<u>No. of cases</u>	<u>Percentage</u>
20	50	32.9
20-39	30	19.7
40-59	56	36.8
60 +	16	10.6

Table 4

<u>Age in years</u>	<u>Hodgkin's disease</u>	<u>R.C.S.</u>	<u>Lymphosarcoma</u>	<u>G.F.L.</u>
20	30/50	10/50	10/50	-
20-39	4/30	8/30	4/30	2/30
40-59	10/56	30/56	14/56	2/56
60 +	2/16	10/16	4/16	-

Table 5

<u>Age group in years</u>	<u>No. of cases</u>
20	6
20-39	6
40-59	18
60 +	<u>4</u>
Total	<u>34</u>

Table 6

<u>Type</u>	<u>No. of total cases</u>	<u>Males</u>	<u>Females</u>
R.C.S.	24	10	14
Lymphosarcoma	10	6	4
Hodgkin's disease	<u>2</u>	<u>-</u>	<u>2</u>
Total.....	<u>36</u>	<u>16</u>	<u>20</u>

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