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**CLINICAL OBSERVATIONS ON PRIMARY
GASTROINTESTINAL LYMPHOMA IN IRAQ**

by

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During the past nine years (1965 - 1973), the writer has dealt with 443 patients with malignant tumours of the gastrointestinal tract, at the Medical City, Baghdad. Of these tumours 112 were oesophageal, 198 gastric, seventy-four in the small bowel, fifty-nine were colonic and rectal tumours and eighty-two were primary lymphomas and were distributed in the gastrointestinal tract as follows:

The stomach only:	13 cases
The small bowel only:	62 "
The stomach and small bowel:	4 "
The small and large bowels:	<u>3 "</u>
Total.....	82 cases

None were seen in the oesophagus.

The Gastric Group: (17 patients). Their incidence among gastric malignancy was 8.8%. Fifteen were males and two females. Their ages ranged from 12-60 years and about half the cases were below forty years. Twelve were Arabs, three Kurds and two from other races (the ratio of the two main races Arabs/Kurds = 5.5/1 in the whole population). Most patients were from the central parts of the country and only one from the mountainous area in the North. Clinical presentation is that of gastric

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malignancy, although four presented as upper gastrointestinal bleeding, four were febrile, and two had clubbing. All investigations were not diagnostic. Eight were reticulum cell lymphoma, seven were lymphocytic and two were Hodgkin's. Ten were resectable, only six are followed and are still living from six months up to eight years. Cytotoxic and/or deep X-ray therapy were given to half of the cases, but in unresectable cases, the prognosis was bad.

The Intestinal Group: (69 patients). Includes sixty-two cases where the small bowel only was involved, in ~~furthe~~ the small bowel and the stomach, and in three the small bowel and colon.

Its incidence among small bowel malignancy was over 94% (sixty-nine out of seventy-four malignant tumours in small bowel), while in the colon and rectum it was only 5.1% (only three out of thirty colonic and twenty-nine rectal malignancies). Forty-two were males and twenty-four were females. The age incidence varies from two years up to sixty-five years, but the majority were under forty years (fifty-three out of sixty-nine patients), and over 50% were under thirty years. Sixty-one were Arabs, six were Kurds, one Turkish and one Persian. (Ratio of Arabs/Kurds = 5.5/1 in the whole population). Most patients were from the Central and Southern parts of the country, very few from the Northern mountainous areas and one from each neighbouring country, Syria, Kuwait and Persia.

The main presentation is either intestinal obstruction or malabsorption. Few simulate peptic ulcer or colitis, while others presented as advanced abdominal malignancy, or peritonitis. Preoperative diagnosis was suspected in the majority, based on certain clinical and laboratory criteria,

(progressive loss of weight, fever, clubbing of fingers, abdominal mass, and high E.S.R.), and abnormal pattern of mucosa of the small intestine on barium study. The diagnosis was confirmed in some cases by oral intestinal biopsy. Thirty were reticulum cell, twenty-nine lymphocytic type, six Burkitt's lymphoma and four Hodgkin's lymphoma.

Surgery was mainly diagnostic or palliative, but in a few only it was radical and curative.

Cytotoxic drugs (cyclophosphamide in the majority), with steroids, and/or deep X-ray therapy was given to most of them. Few are living from three up to eight years after surgery, while others are living less than this period. The majority died from recurrence or from the progressive course of the disease, after a few months from diagnosis, despite all modes of therapy.