MANTLE CELL LYMPHOMA—CASE SERIES AND REVIEW

V Kalansooriya, C Ozo, I Mainie Gastroenterology, Belfast City Hospital, Antrim Area Hospital, Northern Ireland

Introduction Mantle cell lymphoma (MCL) of the colon may present with features mimicking inflammatory bowel disease. We present two cases of patients with a history of MCL presenting with lower GI symptoms undergoing colonoscopy.

Aims/Background Colonoscopy findings of 2 cases discussed were consistent with inflammatory bowel disease; although immunohistochemical studies of tissue biopsies proved to be Mantle Cell Lymphoma.

Method Patient records of two cases presenting with lower GI symptoms and colonoscopy findings of colitis were reviewed along with literature review of Mantle Cell lymphoma.

Results Median age for presentation of MCL as late 6th or 7th decade and to be extremely rare under 30 years. Extra nodal site involvement is very common with gastro intestinal tract being the most common. Patients with GI tract involvement largely remain asymptomatic although subset of patients (approximately 10%) present with the syndrome known as
Multiple Lymphomatous Polyposis (MLP - polypoid tumour masses throughout GI tract excluding oesophagus and anus), can be associated with GI symptoms.

**Conclusion** MCL's tropism for GI tract is recently recognized. Microscopic involvement of GI tract is found in patients free of GI symptoms. Findings consistent with the case described here, where initial diagnosis by endoscopist was of colitis, are rarely documented.