



DERMATOPATHOLOGY

## CHRONIC NASAL ULCERATION REVEALING DIFFUSE LARGE B-CELL LYMPHOMA EBV +

*Siham Belmourida<sup>(1)</sup> - Hind Palamino<sup>(1)</sup> - Meriame Meziane<sup>(1)</sup> - Nadia Ismaili<sup>(1)</sup> - Laila Benzekri<sup>(1)</sup> - Karima Senouci<sup>(2)</sup> - Badereddine Hassam<sup>(2)</sup>*

*Ibn Sina Hospital Rabat, Departement Of Dermatology And Venereology, Rabat, Morocco<sup>(1)</sup> - Ibn Sina Hospital Rabat, Departement Of Dermatology And Venereology, Rabat, Morocco<sup>(2)</sup>*

Context : Epstein-Barr virus positive diffuse large B-cell lymphoma (EBV+ DLBCL) is described only in adults. However, it can affect younger patients.

We report an extremely interesting case of a centofacial localization of (EBV+ DLBCL) diagnosed in a 13-year-old immunocompetent girl.

Observation: The clinical examination showed a mucocutaneous ulcerations of centofacial localization destroying the nose and the nasal septum, without general signs nor associated lymphadenopathies.

Biological assessment revealed no immunodeficiency or immunological disorder, two skin biopsies were non-specific, the third was endonasal in favor of diffuse large cell B lymphoma (EBV) and the extension assessment was without particularity

The diagnosis of (EBV+ DLBCL) with strict cutaneous and mucosal involvement was retained and the patient was put on polychemotherapy with excellent result.

key message: Our observation is extremely interesting because, to our knowledge, no such cases have been noted in the literature in immunocompetent children, especially with the indolent, chronic and localized character of lymphoma and the excellent evolution under poly-chemotherapy.

(EBV+ DLBCL) is extremely rare and aggressive. This entity is unique, in that it affects patients without immunodeficiency with a predilection for the elderly, unlike our young patient. The median age for this entity is 71 years with a slight male predominance. Cutaneous involvement is made of bright red or brown nodules, with multiple localization evolving towards ulceration. The diagnosis is histological confirmed by immunohistochemistry. The prognosis of this newly recognized subtype remains in doubt, and there is no accepted treatment.

More information needs to be obtained to better understand this new entity and further investigation is needed to better detail the prognosis and therapeutic management.

