Lymphoma of vagina in a Nigerian community

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Abstract

Long named as lymphoma in 1873 is the malignant tumor of lymphocytic cell. Its occurrence in the vagina is a rarity. Since, single case reports have appeared in seven countries, such a case among the Ethnic Group in Nigeria deserves documentation. It was typical in causing bleeding and forming usually in the posterior wall in all countries.

Keywords: Lymphocyte; Tumor; Lymphoma; Vagina; Bleeding; Posterior wall; Igbo;

Introduction

The Merriam-Webster’s Collegiate Dictionary defines lymphoma as the malignant form of lymphatic tissue and dates 1873 as when it was first named [1]. Now, there are single case reports from Turkey [2], India [3], Italy [4], Portugal [5], China [6], Japan [7], and Spain [8]. Therefore, having encountered the single case, which appeared among the Igbo ethnic group [9], this report is deemed to be worthy of demonstration. It appeared as in other parts especially as to the bleeding and the posterior wall origin.

Case report

OE, a 37-year-old female consulted Dr B. Igbogbahaka at the Ucheoma Hospital at Aba, Nigeria, with the complaint of postcoital bleeding since 9 months. On inspection, a friable whitish mass was attached to the posterior wall of the vagina. It was easily removed digitally. Complete excision was then undertaken. Recovery was uneventful.

A 4.5 x 3.0 x 2.0 cm mass was submitted to the senior author (WIBO). On section, it was surprisingly soft. On microscopy, there were sheets of round hyper chromate cells growing diffusely and manifesting the mitotic activity of lymphoma.

Discussion

Many years ago, the senior author published the biography of Thomas Hodgkin [10], whose eponym adorns a type of the lymphomas. Recently, interest has been shown in this community with reference to several aspects this malignancy [11-14].

As regards this malignancy, comparison of the local case of vaginal lymphoma with foreign cases may be appreciated. Thus, the local 37 years compared favorably with the 30 years in Turkey [2] and 35 years in India [3]. As for the precise origin, the posterior wall was the commonest everywhere.

In conclusion, treatment was carried out in advanced countries. However, the local patient’s recovery was uneventful. Apparently, it was still localized.

References


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