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Summary

GASTRIC BURKITT LYMPHOMA, AN INFREQUENT CAUSE OF HEMATEMESIS: A CASE REPORT

Mouna Salihoun

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Case report of primary gastric Burkitt lymphoma in an 81-year-old man presenting with gastrointestinal bleeding and diagnosed by endoscopic biopsy with immunohistochemical confirmation.

KEY POINTS

- Primary gastric Burkitt lymphoma is an exceptionally rare and aggressive subtype of non-Hodgkin's lymphoma, ranking second among gastric malignancies after adenocarcinoma.
- The patient presented with epigastralgia, vomiting, hematemesis, and melena; endoscopy revealed antral pre-pyloric ulcerative process and fundic ulcerations.
- Histological examination showed diffuse lymphomatous infiltration with immunohistochemistry positive for CD20, CD10, Bcl6, and Ki-67, negative for CD23, CD5, and Bcl2, confirming Burkitt lymphoma.
- CT imaging demonstrated diffuse antropyloric wall thickening and perigastric lymph nodes measuring 1 to 2 cm with no distant metastases.
- Multidisciplinary team decided on intensive systemic chemotherapy with cyclophosphamide and rituximab; this case contributes to the limited global literature on primary gastric Burkitt lymphoma.

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