

# Diagnosis of Post-Transplant B-Cell Lymphoma Following Laparoscopic Cholecystectomy



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## Introduction

- Post-transplant lymphoproliferative disorder (PTLD) is a serious and sometimes fatal complication following solid organ transplantation.
- PTLD is generally thought of as an iatrogenic complication of immunosuppression.
- The incidence of PTLD varies based on the type of solid organ transplantation.
- PTLD is difficult to diagnose and is often diagnosed late due to vague and nonspecific symptoms.
- Often PTLD is found incidentally
- It is hypothesized that earlier detection could lead to improved outcomes.

## Case Presentation

- 70 year-old male with history of deceased donor kidney transplant for end stage renal disease who was referred to our clinic by his Nephrologist due to abnormally elevated transaminases.
- Right upper quadrant ultrasound noted cholelithiasis without any other abnormality
- Patient denied typical biliary symptomatology
- Laparoscopic cholecystectomy was performed for atypical symptomatic cholelithiasis
- Intraoperatively, an abnormally large lymphnode was noted adjacent to the cystic artery which was resected with the gallbladder specimen and sent to Pathology
- Final Pathology was consistent with the diagnosis of B-cell Lymphoma
- The patient as subsequently referred to Medical Oncology for further staging and treatment.

## Discussion

- When solid organ transplant patients present with atypical symptoms and a diagnosis is not apparent a broad and thorough differential must be explored.
- It is vital for the General Surgeon to remain aware of the heightened potential for undiagnosed malignancy in these patients even while being evaluated for seemingly unrelated surgical disease processes.

## References

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