Oral presentations

Canine hepatosplenic T-cell lymphoma treated with a lomustine-based chemotherapy protocol

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OBJECTIVES

T-cell hepatosplenic lymphoma is a distinct anatomical entity in dogs and humans. It is characterized by neoplastic infiltration of the liver and/or spleen with gamma-delta T-cells without peripheral lymphadenopathy. Typically the clinical course is very aggressive and responses to treatment are very poor in dogs and humans. Currently, there are no studies reporting successful treatment outcome in dogs with confirmed T-cell immunophenotype treated with lomustine-based chemotherapy protocols. The aim was to describe a small cohort of dogs diagnosed with hepatosplenic

T-cell lymphoma and treated with lomustine-based chemotherapy protocols.

METHODS

We retrospectively identified 5 dogs fulfilling the criteria.

RESULTS

All patients presented in substage B with the most common clinical signs being lethargy and gastro-intestinal signs. All patients had T-cell immunophenotype confirmed by PARR (n = 4) or flow cytometry (n = 1) and lacked peripheral lymphadenomegaly. Hepatic involvement was documented cytologically in all patients. Splenic involvement was documented in one, although splenic aspirate was performed in only two patients. In 2/5 patients, pulmonary involvement was suspected. All dogs received a lomustine-based protocol with L-asparaginase and with (n = 4) or without (n = 1) procarbazine. 3 dogs showed complete and 2 dogs partial resolution of clinical signs. The median duration of the response was 117 days. The mean and median overall survival times were 98 and 134 days respectively.

STATEMENT (CONCLUSIONS)

To our knowledge, this is the first report describing favourable responses to treatment of hepatosplenic T-cell lymphoma with a lomustine-based protocol, with clinical improvement documented in all dogs. Inclusion of more cases is necessary to further explore this treatment option.

The frequency of immunophenotyping and clonality detection in the diagnosis of feline lymphoma

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OBJECTIVES

T-cell lymphomas in dogs generally have a relatively worse prognosis than B-cell lymphomas. Few reports in cats with lymphoma have attempted to prove or refute this notion. This study aims to determine the proportion of cats with lymphoma that are subtyped as part of a larger study on the frequency of lymphoma-specific treatment and the relationships between subtype and survival.

METHODS

Consolidated Veterinary Services (CVS) laboratory databases were retrospectively searched to identify cats diagnosed with lymphoma by cytology and histopathology from 2014 to 2018. Data was collated in Microsoft Excel.

RESULTS

1,682 cats with lymphoma were identified. Immunohistochemistry (IHC) (n = 88) and/or PCR for Antigenic Receptor Rearrangement (PARR) (n = 13) were requested in only 6% of the cases (n = 99), identifying 57 B-cell, 38 T-cell lymphomas, whilst 4 were inconclusive. Based on the lymphoid cell staining pattern observed at IHC, a further diagnosis of T-cell rich B cell lymphoma (TCRBCL) was made in 3 cases and Enteropathy-associated T-cell lymphoma (EATCL) in 2 cases.

STATEMENT (CONCLUSIONS)

Immunophenotyping of feline lymphoma is seldom requested following a diagnosis of lymphoma, posing a challenge both for its evaluation as a prognostic tool in large retrospective studies and potentially its future utilisation as a prognostic tool.

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