

## INTRODUCTION

We present a unique case of jaundice and biliary stricture with pathologic evaluation revealing high-grade B-cell non-Hodgkin's lymphoma.

## PATIENT DESCRIPTION

- 70-year-old female with a history of breast cancer
- presenting with jaundice, abdominal pain and vomiting
- total bilirubin of 2.6 mg/dl
- Serum testing revealed elevated CA 19-9 levels

## CLINICAL COURSE

- CT imaging revealed soft tissue thickening surrounding the common bile duct and encasing the proper hepatic, right and left hepatic arteries, and the main portal vein
- ECRP was performed and attempts at stent placement resulted in bile duct perforation
- A stent was placed, and cholecystectomy was performed.
- further jaundice a month later

## CLINICAL COURSE (CONT)

- Bile duct brush cytology revealed atypical epithelial cells.
- Fine Needle Aspiration biopsy (FNAB) revealed no malignant cells.
- Endoscopic ultrasound revealed a mass measuring 39 mm by 28 mm.
- Repeat ERCP demonstrated persistent hilar stricture prompting stent exchange.
- Spyglass catheterization was unsuccessful due to ampullary stricture.
- Repeat FNAB of the common bile duct confirmed high-grade B-cell non-Hodgkin's lymphoma.
- The mass was diffusely positive for CD20 and PAX-5 with high Ki67/MIB-1 proliferation index.

## COMPLICATIONS

- CT imaging demonstrated an infiltrating hypo enhancing mass within the hepatic hilum.
- In December of 2021, the patient presented with ascites.

## COMPLICATIONS (CONT)

- Peritoneal fluid cytology revealed malignant lymphoma with monoclonal B-cell proliferation with a positive antigen profile of CD19, CD45, and Lambda.
- She was treated with two cycles of R-CHOP (rituximab, cyclophosphamide, doxorubicin hydrochloride, vincristine, and prednisolone) followed by two cycles of Rituximab alone
- She experienced life-threatening arterial hemobilia that was noted during an ECRP.

## DISCUSSION

- It is rare for the bile duct to be involved in cases of non-Hodgkin's lymphoma and even more unusual to have lymphomatous obstruction of the biliary system.
- Although it is difficult to differentiate lymphomas from other common malignancies that impact the biliary system, it is imperative to make the distinction as lymphoma can be much more responsive to radiation and chemotherapy.
- Chemotherapy poses bleeding risks especially in lymphomas invading biliary trees.

## CONFLICTS OF INTEREST

The authors have no conflicts of interest to report.