

# The young side of **LYMPHOMA**

#### gli under 40 a confronto

Milano, 14-15 aprile 2023

#### Linfoma Vitreoretinico: il punto di vista dell'oculista

Matteo Menean

IRCCS Ospedale San Raffaele Ophthalmology Department, Chairman Prof. F. Bandello



#### The young side of LYMPHOMA

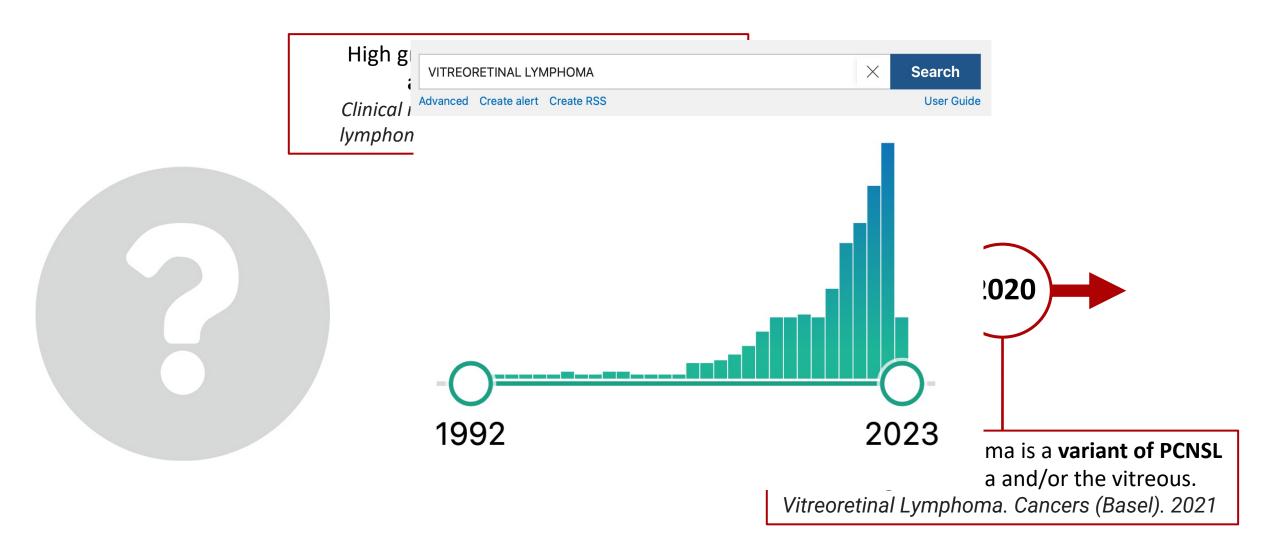
gli under 40 a confronto

**Disclosures of Name Surname** 

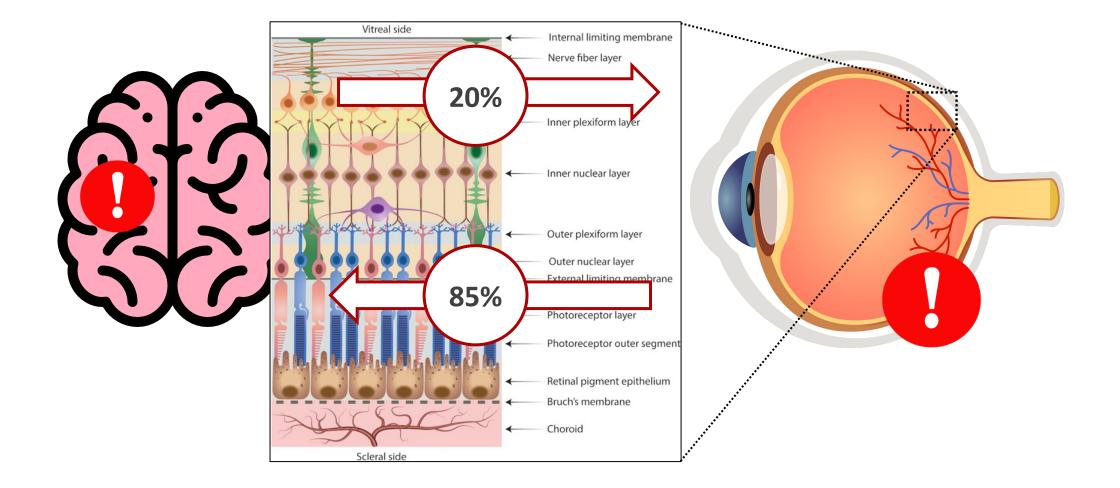
NO RELEVANT FINANCIAL DISCLOSURES

Milano, 14-15 aprile 2023

### Vitreoretinal Lymphoma

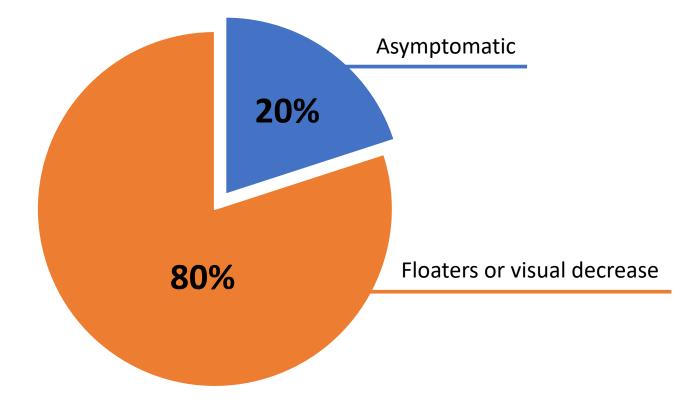


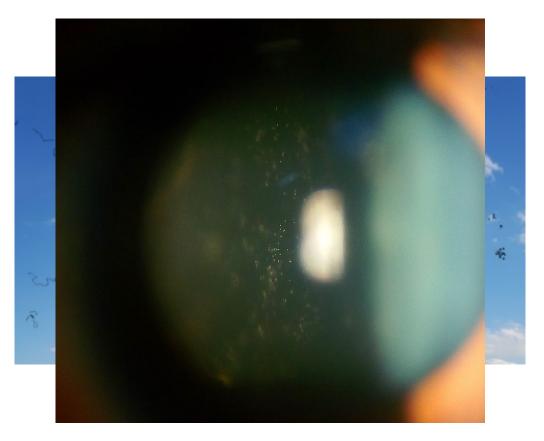
### Vitreoretinal Lymphoma



# **Visual Symptoms**

**95% BILATERAL** 





VITREORETINAL LYMPHOMA (VRL) PRESENTS AS UVEITIS (MASQUERADE SYNDROME)

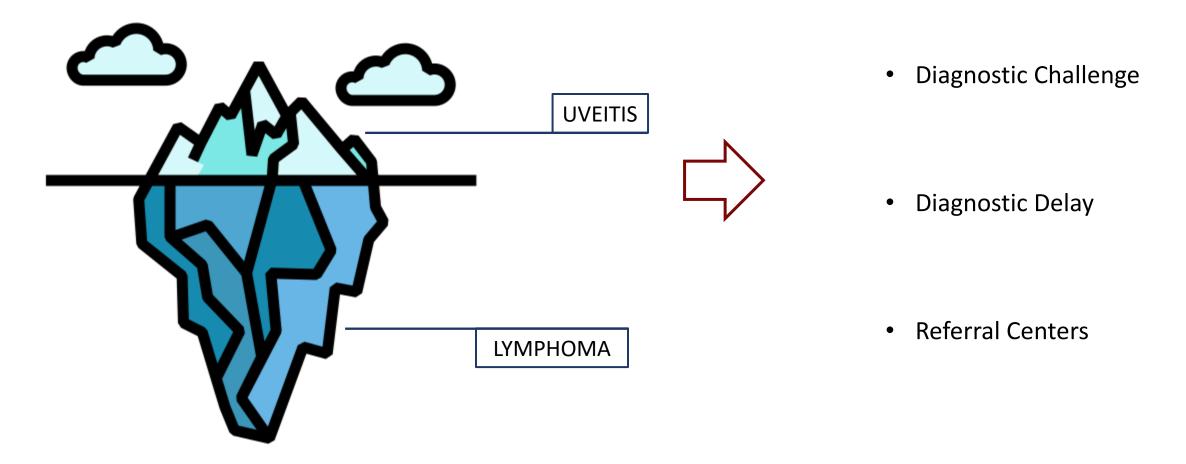
### Uveitis Masquerade Syndromes

Aniki Rothova, MD, PhD, Francien Ooijman, MD, Frank Kerkhoff, MD, Allegonda Van der Lelij, MD, PhD, Henk M. Lokhorst, MD, PhD

*Ophthalmology 2001;108:386–399 © 2001 by the American Academy of Ophthalmology.* 

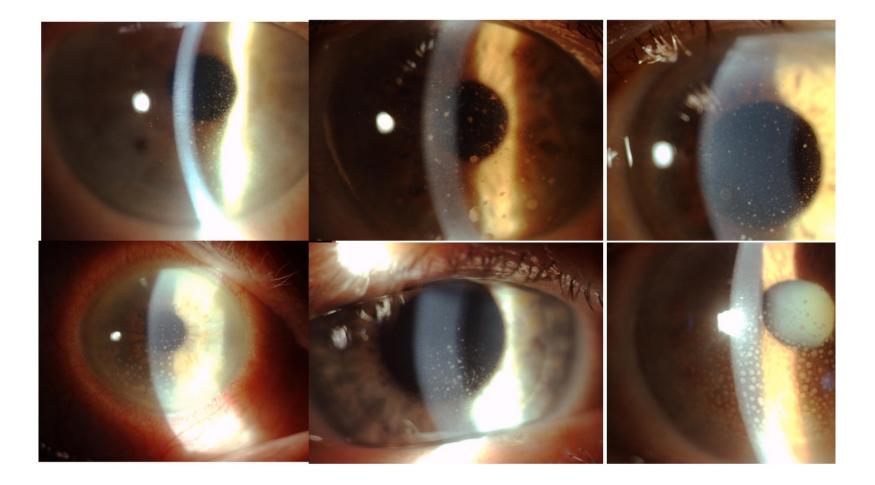
- ➢ 828 consecutive cases of uveitis
- 5.0% Masquerade Syndrome
- > 2.5% Neoplastic Masquerade Syndrome

#### **MASQUERADE SYNDROME**



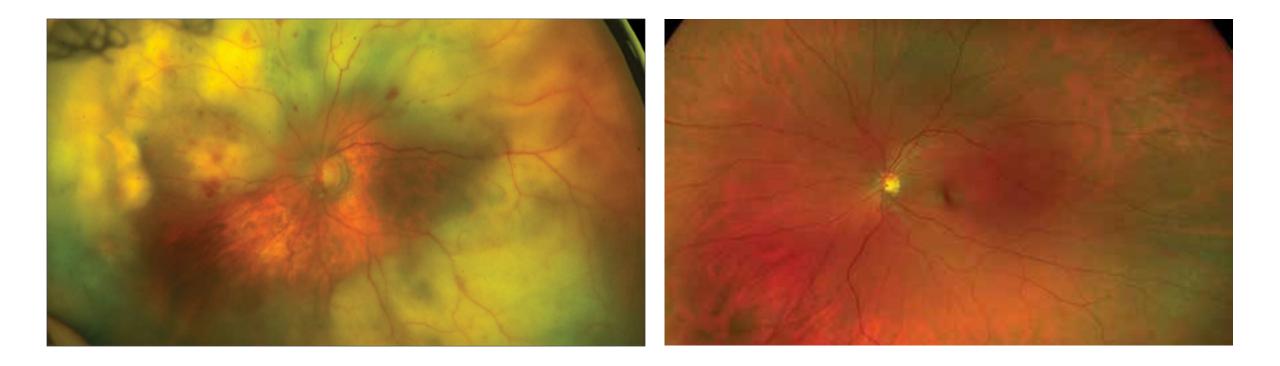
# **Anterior Segment**

Anterior Uveitis

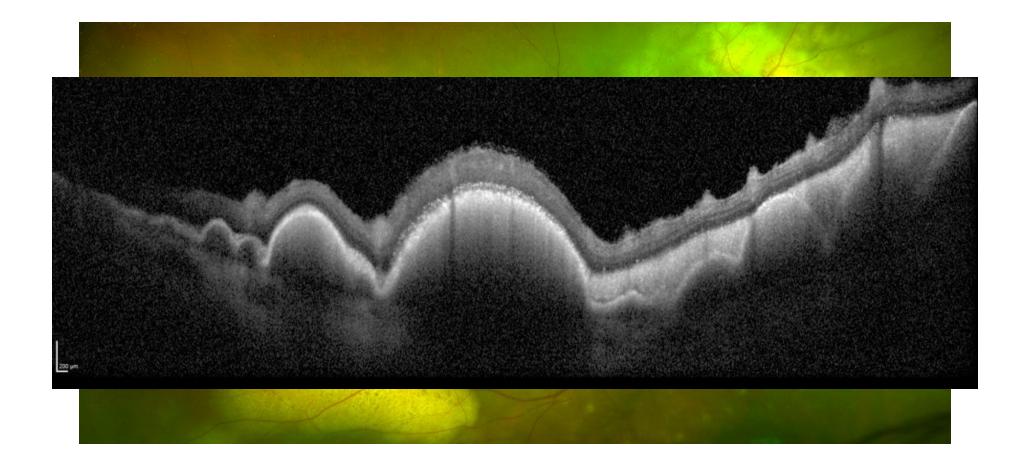


Pathologic

Normal



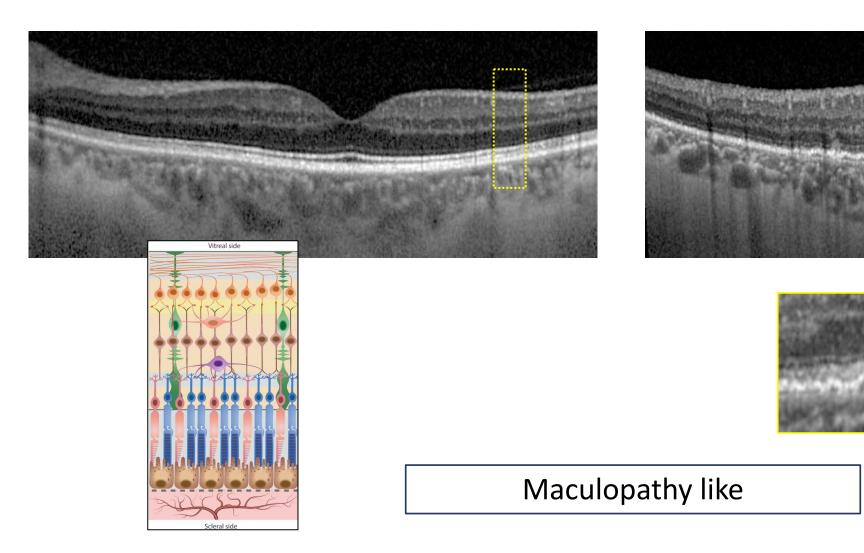
**Retinal Infiltration** 



Multiple Pigment Epithelium Detachments

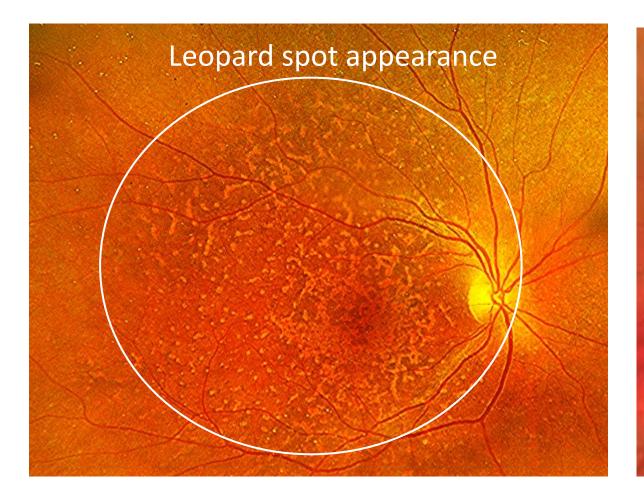
Normal

Pathologic



Pathologic

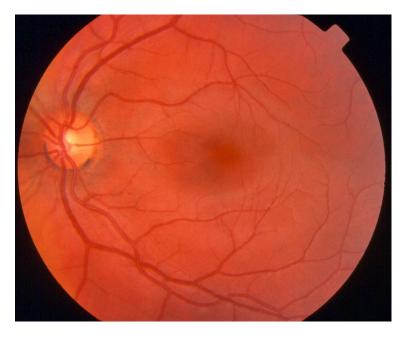
Normal

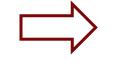






Normal





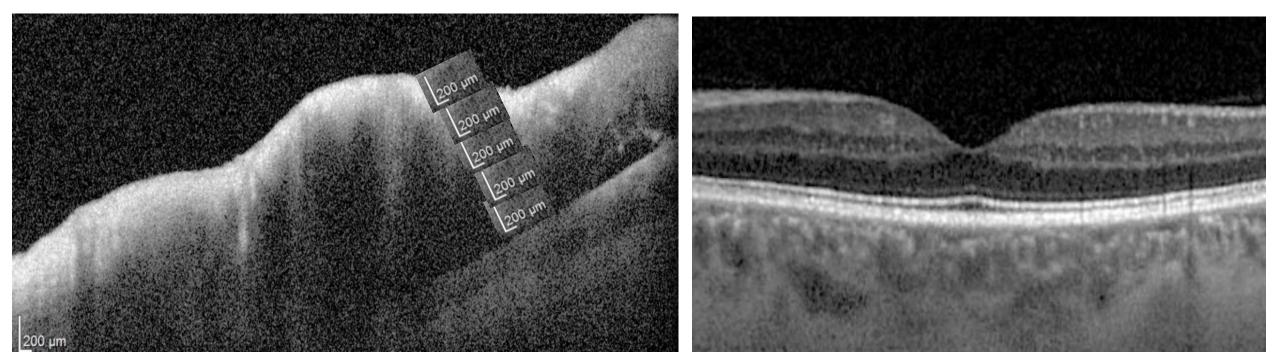
Hemorrhagic mass-like appearance

Pathologic Normal

Wide-spread Atrophy

Pathologic

Normal



Retinitis-like Appearance

### WHEN SUSPECT E VITREORETINAL LYMPHOMA?

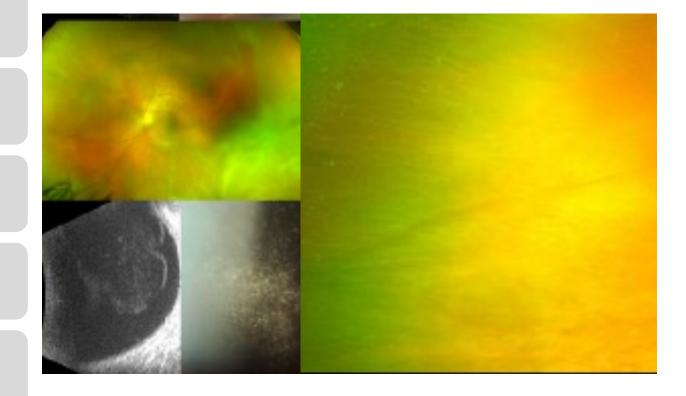
Age > 60 yrs-old

Chronic uveitis

Bilateral in 85%

Poor response to steroids

#### Suggestive ocular manifestations



Takhar JS et al. Primary vitreoretinal lymphoma: empowering our clinical suspicion. Curr Opin Ophthalmol 2019, 30:491 – 499 Kase S et al. Cancer diagnosis & prognosis 1: 69-75 (2021)

VITRECTOMY



# - CLINICAL SUSPICION

#### **GOLD STANDARD**

- Vitreous Cytopathology
- Retinal Histopathology





Low sensitivity (60-70%)

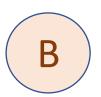
#### **MOLECULAR ANALYSIS**



#### MYD88 L265P MUTATION

#### **MYD88 L265P MUTATION DETECTION IN THE AQUEOUS HUMOR OF PATIENTS WITH VITREORETINAL LYMPHOMA**

ELISABETTA MISEROCCHI, MD,\* ANDRÉS J. M. FERRERI, MD,† CHIARA GIUFFRÈ, MD,\* MARIA G. CANGI, PhD,‡ ILARIA FRANCAVIGLIA, MS,‡ TERESA CALIMERI, MD,† MAURILIO PONZONI, MD,‡ LORENZA PECCIARINI, MS,‡ FRANCESCO M. BANDELLO, MD,\* GIULIO M. MODORATI, MD\*



IL-6 AND IL-10 ANALYSIS

#### USE OF A THRESHOLD OF INTERLEUKIN-10 AND IL-10/IL-6 RATIO IN OCULAR SAMPLES FOR THE SCREENING OF VITREORETINAL LYMPHOMA

CELINE POCHAT-COTILLOUX, MD,\* JACQUES BIENVENU, PhD,† ANH-MINH NGUYEN, MD,\* ROBIN OHANESSIAN, MD,‡ HERVÉ GHESQUIÈRES, PhD,§ PASCAL SÈVE, PhD,¶ LORNA GARNIER, PhD,† LAURENT KODJIKIAN, MD, PhD, FEBO\*\*\*

#### MOLECULAR ANALYSIS

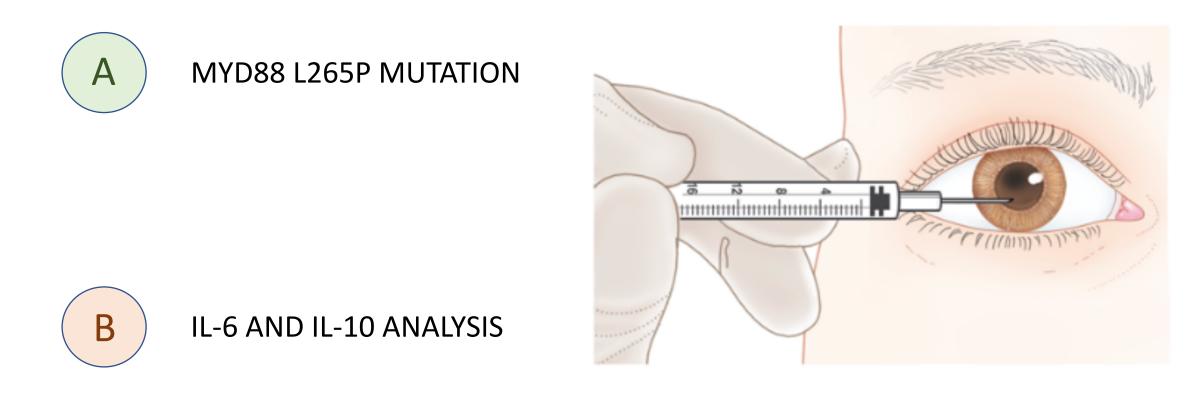


#### MYD88 L265P MUTATION

- Both aqueous and vitreous
- Additional Analysis



#### MOLECULAR ANALYSIS

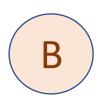


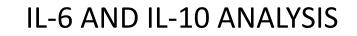
#### MOLECULAR ANALYSIS



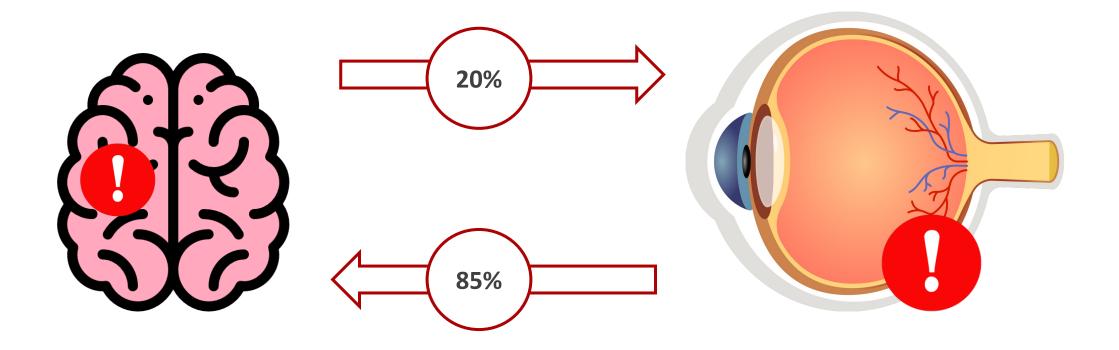
#### MYD88 L265P MUTATION







### Prognosis

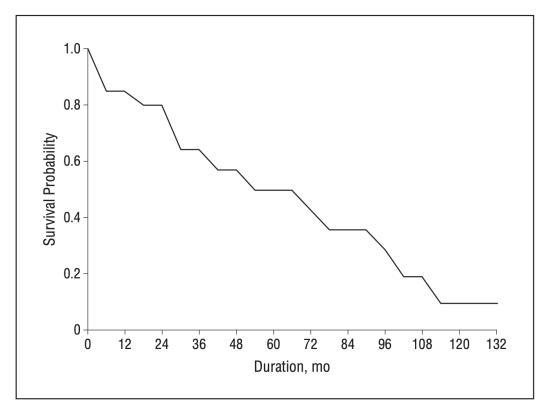


#### Sight and life threatening disease

A 20-Year Review of Incidence, Clinical and Cytologic Features, Treatment, and Outcomes

### Prognosis

#### Sight and life threatening disease



**Figure.** Kaplan-Meier overall survival curve for 21 patients with vitreoretinal lymphoma.

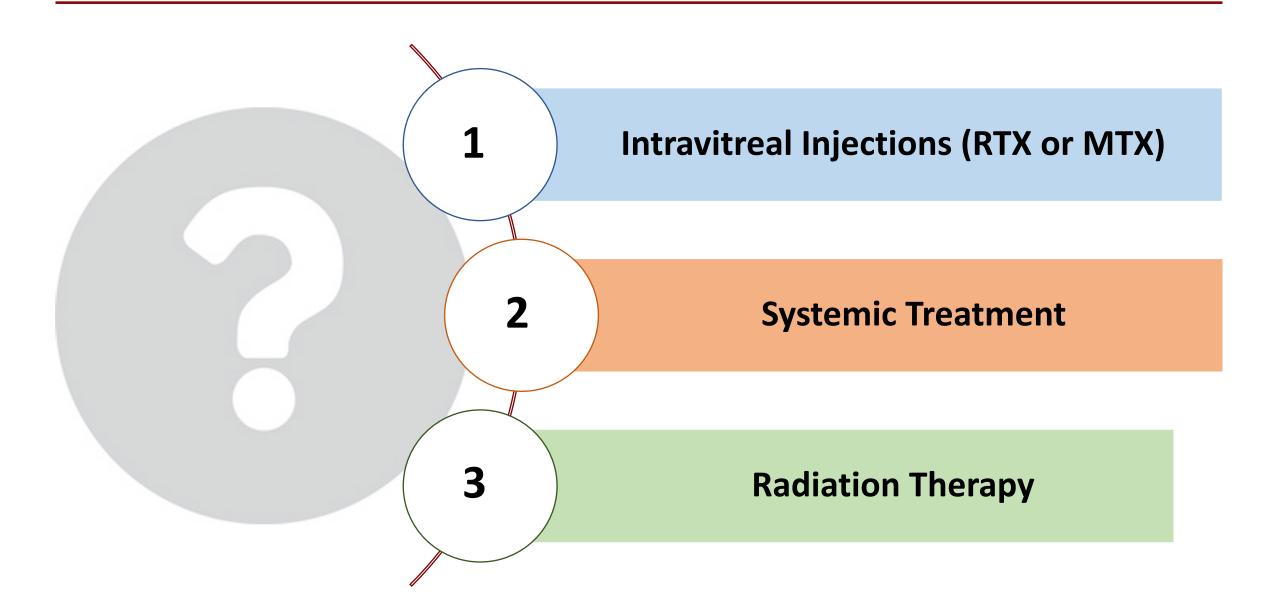
CNS INVOLVEMENT

 $\sqrt{}$ 

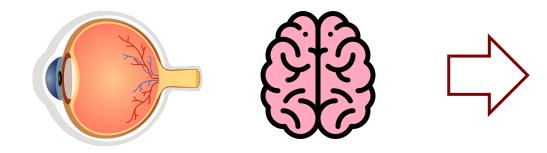
Median survival time: 33 months

A 20-Year Review of Incidence, Clinical and Cytologic Features, Treatment, and Outcomes

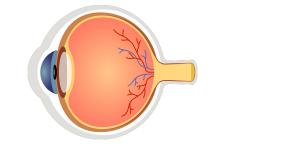
# Therapy

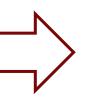


# Therapy

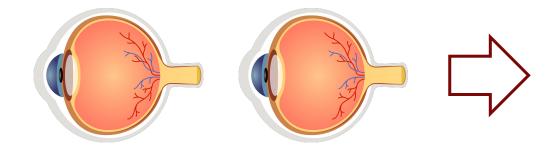


Systemic Treatment (HD-MTX) + IVT



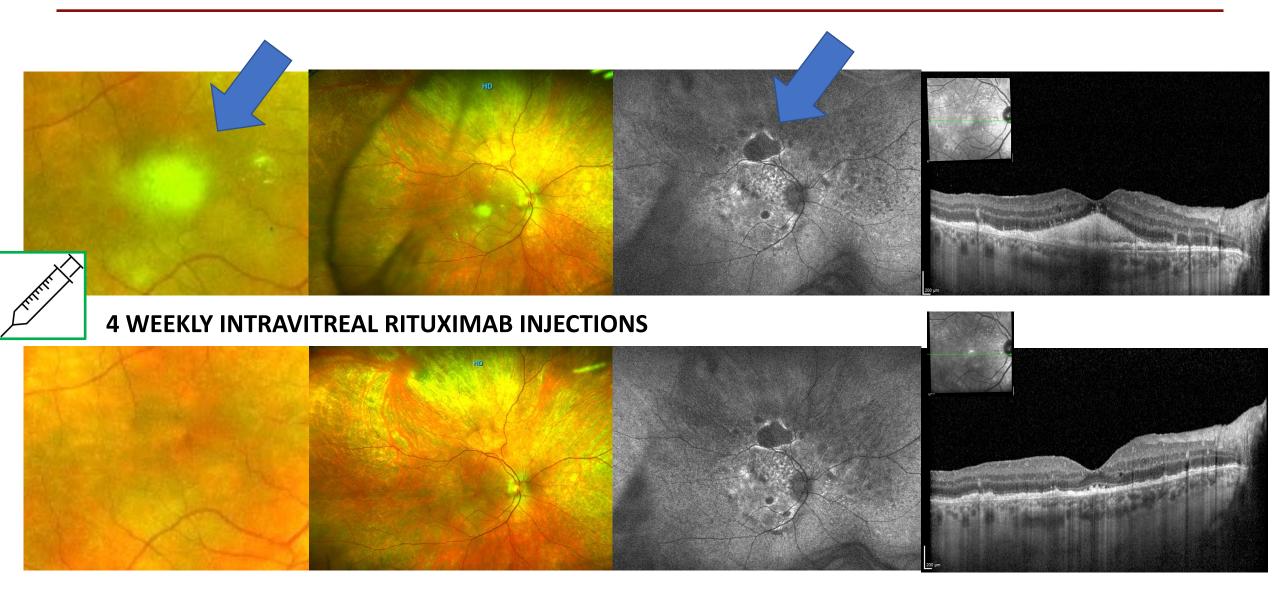


IVT or radiation therapy

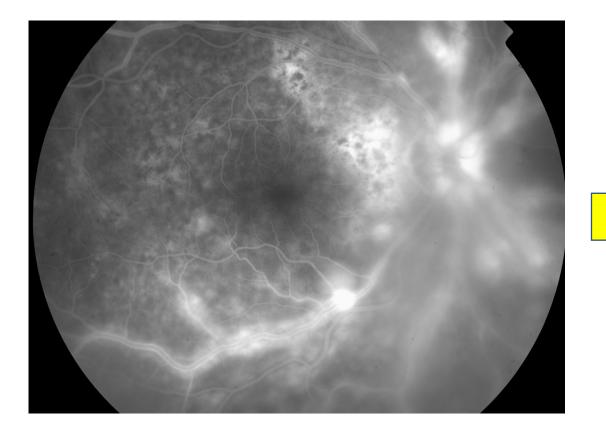


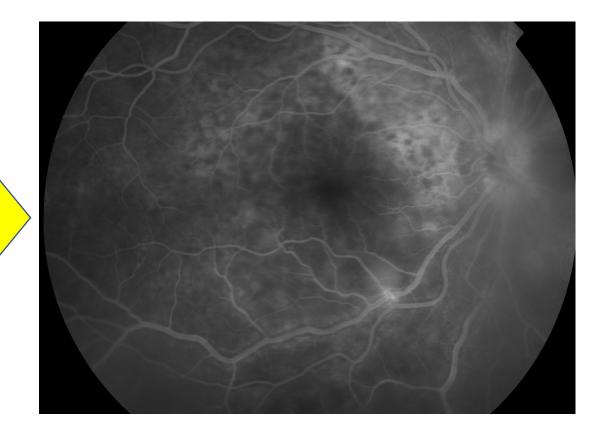
Systemic Treatment (HD-MTX) + IVT





#### **4 WEEKLY IVT RTX**





Kitzman AS, Pulido JS et al. Eye 2007; Raja H, Pulido JS et al. PLoS One 2013; Itty S, Pulido JS et al. Retina 2009



0.44 ± 0.28 logMAR vs
0.33 ± 0.29 logMAR

Clinical features predictive of vision loss in patients with vitreoretinal lymphoma: a single tertiary center experience

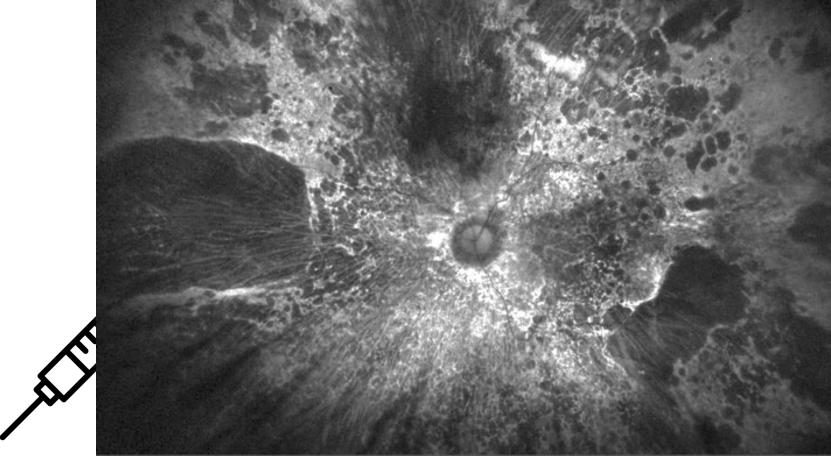
DO NOT PREVENT CNS INVOLVEMENT

Mirinae Kim<sup>1,2</sup>, Hyun Suh<sup>1,2</sup>, Young Gun Park<sup>1,2</sup> & Young-Hoon Park<sup>1,2</sup>

0,0				
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Kim et al. Clinical features predictive of vision loss in patients with vitreoretinal lymphoma: a single tertiary center experience. Sci Rep

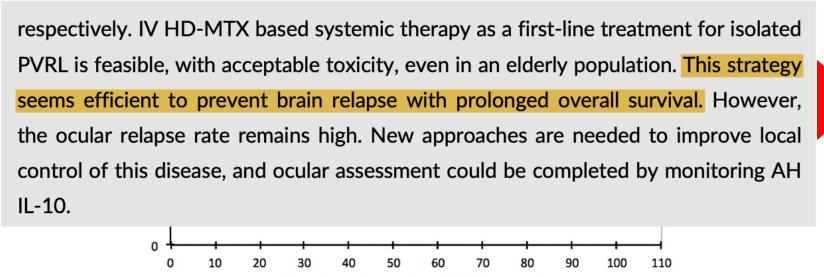
1,0



# Systemic Therapy

care is essential for the management and better prognosis of VLR. In 2011, the International PCNSL Collaborative Group published therapeutic principles for VRL [39]. According to the group, no optimal therapy for VRL without detectable CNS lesions has been defined, but systemic therapy is required if lymphoma lesions occur in the CNS and local therapy may be used if the disease is limited to the eye.

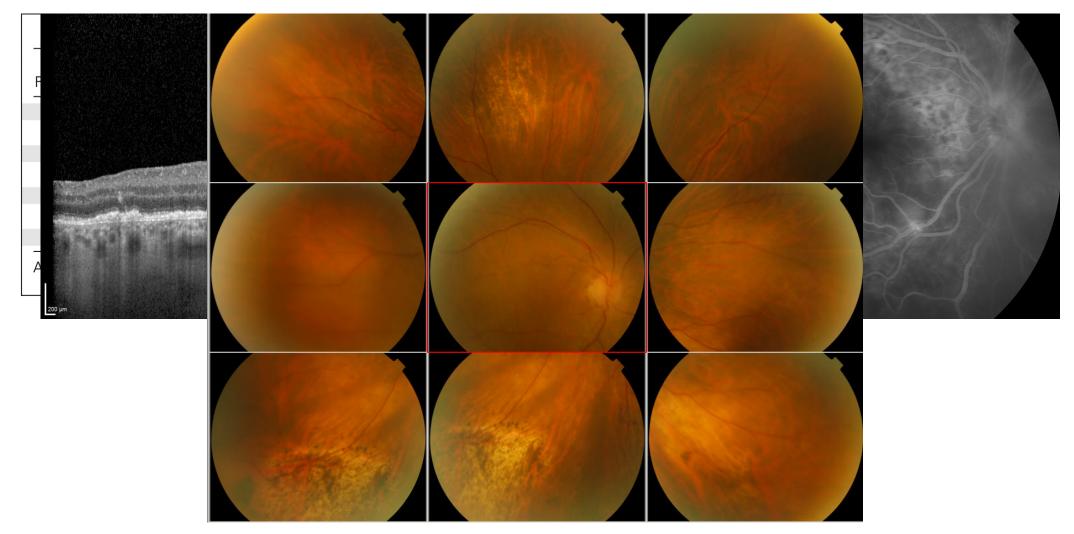
#### Brain-free survival



Time from diagnosis of PVRL, months

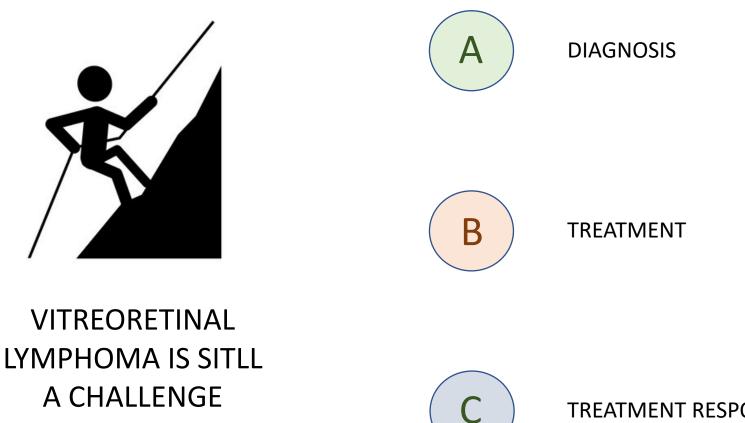
Sobolewska B, Chee S-P, Zaguia F, Goldstein DA, Smith JR, Fend F, Mochizuki M, Zierhut M. Vitreoretinal Lymphoma. Cancers. 2021 Lam M et al. Intravenous high-dose methotrexate based systemic therapy in the treatment of isolated primary vitreoretinal lymphoma: An LOC network study. Am J Hematol. 2021 Jul 1

#### **Treatment Response Assessment**



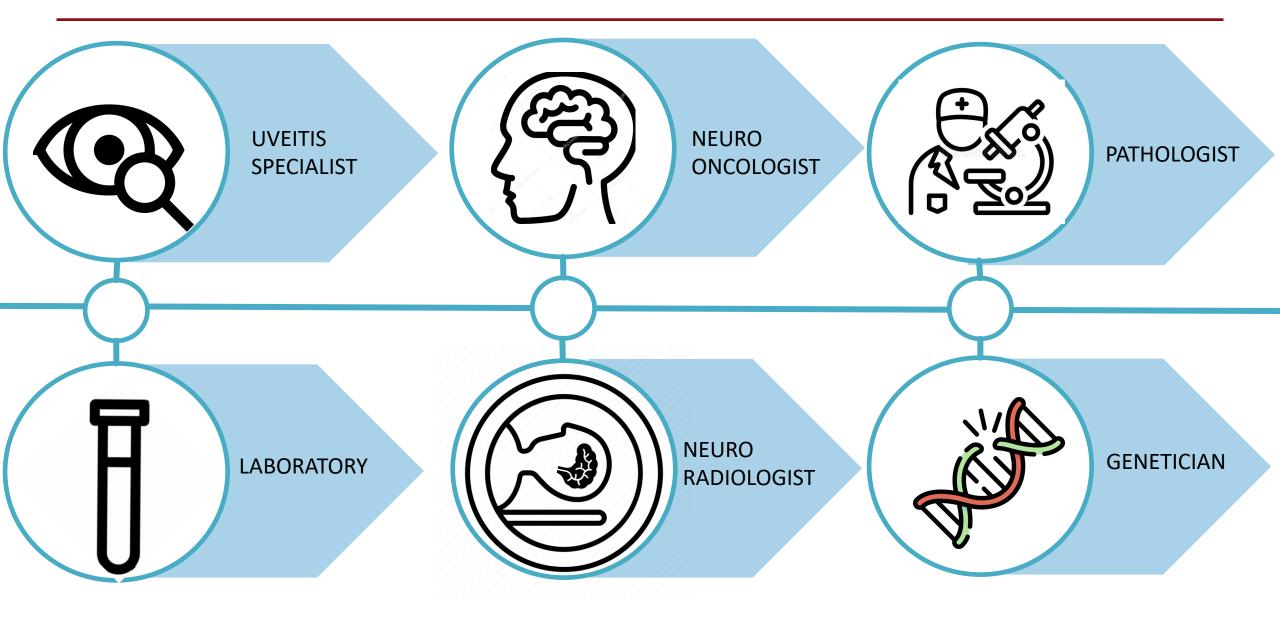
Abrey LE et al; International Primary CNS Lymphoma Collaborative Group. Report of an international workshop to standardize baseline evaluation and response criteria for primary CNS lymphoma. J Clin Oncol. 2005

#### Conclusions



TREATMENT RESPONSE ASSESSMENT

#### Conclusions



### Thank you for attention

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