

DEPARTMENT OF ONCOLOGY

Direct Tel: 01245 513840
Direct Fax: 01245 516497

Broomfield Hospital
Court Road
Chelmsford
Essex
CM1 7ET

UP/ma/01116521(d) **Research Clinic**
Clinic date: 22 March 2011 -

Dr Dc Wijekoon
The Surgery, Notley Green
Great Notley
Braintree Essex CM7 8US

Dear Dr Wijekoon

Mr Andrew HALFACRE [REDACTED]

Diagnosis: Stage II / III Diffused large b-cell lymphoma left groin and pelvic lymph node (also ? right axillary lymph node). Biopsy - 14/02/2011 - left inguinal lymph node - diffused large B-cell lymphoma - CD20, CD79a, CD10 and bcl6 +Ve. Cyclin D1 and CD30 -Ve. Proliferation index with Ki-67 - 70%

Proposed Treatment: R-CHOP every 3 weeks x 8 followed by involved field radiotherapy - 30Gy/15#

This pleasant gentleman aged 46 was initially seen with left groin swelling thought to be inguinal hernia but per-operatively was found to have inguinal lymph node which was biopsied on 12/02/2011 in consistent with diffused large B-cell lymphoma. Subsequent staging CT on 08/03/2011 confirms extensive mass in the left groin area measuring 15 x 10 cm as well as enlarged left common iliac, left obturator and right external iliac lymph nodes. There is no paraaortic lymphadenopathy and spleen and liver remains clear. There was 2 cm hyperdense lesion in the right kidney which could be haemorrhage or a lymphomatous deposit.

Clinically he has massive left leg oedema as well as scrotal swelling and a 1 x 1 cm² right axillary lymph node.

He could not tolerate bone marrow biopsy and as a result it would be difficult to be sure of his staging but thinking this to be negative his staging is stage II / III.


PMH: Nil significant. **Current Medications:** Regular Codeine and Paracetamol. p.r.n Tramadol and Zopiclone. No drug allergies.

[REDACTED]

I have explained to him the findings of all the tests he has had so far, explaining that he has stage II / III diffused large B-cell lymphoma which is potentially curable with treatment involving combination chemotherapy of R-CHOP followed by involved field radiotherapy to the residual disease.

In view of his symptoms we aim to start his chemotherapy within the next 48 hours if possible and see him prior to his next treatment to see how he went on.
His height today is 184 cm and weight 102 kilos.

Yours sincerely


Dr. Udaiveer Panwar
Locum-Consultant Clinical Oncologist

✓ cc. Mr Andrew Halfacre, [REDACTED]