Neurolymphomatosis is a rare disease, defined as lymphomatous infiltration of the peripheral nervous system. A 75-year-old man with a history of diffuse large B-cell lymphoma (DLBCL) developed severe pain, sensory disturbance, weakness, and muscle amyotrophy in the right upper extremity. These symptoms were observed in the right ulnar and median nerve areas. Gadolinium-enhanced magnetic resonance imaging revealed an unidentified structure with contrast enhancement in the right axillary fossa (Picture 1). Ultrasonography showed apparent swelling at the right ulnar and median nerves, which implied neurolymphomatosis (Picture 2a-c) (1, 2). Fluorodeoxyglucose-positron emission tomography showed an increased uptake in these nerves, corresponding to the ultrasonographic lesions, and a small tumor of the right upper arm, confirmed by ultrasonography (Picture 2d, 3). A biopsy of the tumor revealed recurrence of DLBCL (Picture 4), and he was diagnosed with neurolymphomatosis. Ultrasonography, a non-invasive tool for evaluating peripheral nerves, is instrumental in the diagnosis of neurolymphomatosis.

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Picture 2.

Picture 3.
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References


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