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## **LYMPHOMAS IN DAILY PRACTICE. A DIFFERENTIAL DIAGNOSIS THAT SHOULD BE CONSIDERED**

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In this issue of Case Reports, two papers describe the cases of middle-aged patients with lymphomas in different locations. Thus, this editorial is a good opportunity to draw the medical community's attention to the relevance of this disease.

Lymphomas are a type of cancer characterized by the proliferation of malignant cells in lymphoid tissues; they may have different locations, ranging from the lymph nodes (which increase in volume) to any organ with lymphatic cells, such as the kidney, gastrointestinal system, and even, as in the cases described here, the cervix, (1) nose, and sinuses (2).

The low specificity of symptoms in extranodal lymphomas hinders timely patient consultation, making the diagnostic process difficult and, as a result, delaying disease detection. This forces the first contact physician and the specialists who provide more complex care to be constantly alert to diagnose these entities. It should be noted that, according to the National Cancer Institute, the annual rate of new cases of non-Hodgkin lymphoma is 19.6 per 100 000 inhabitants (3).

Although symptoms such as fever, night sweats, weight loss, and fatigue are rather nonspecific, they should alert physicians to the possibility of lymphoma. Therefore, the diagnostic effort should involve a comprehensive medical history, complete blood count, and diagnostic imaging to explore possible organ involvement. This initial approach defines whether patients require biopsy, either lymph node, solid organ, or bone marrow biopsy.

The classification system for lymphomas is complex and has changed throughout history. For that reason, pathologists are very committed to reading and analyzing the specimens provided to them.

Although all the above seems obvious, tertiary and quaternary care hospitals often receive patients with advanced cancer making it difficult to explain the delay in diagnosis.

On the other hand, in recent decades, the research and development of new treatment schemes have markedly improved the prognosis of this group of malignancies, with five-year survival rates of between 70% and 80%, which could increase if the diagnosis is achieved early.

In summary, high suspicion, clinical effectiveness for early diagnosis, and timely initiation of therapies should be the medical community's goal to treating not only lymphomas, but any disease.

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