Beneath the Flesh, the Answer Sleeps

AN INTRIGUING CASE OF LYMPHADENOPATHY OF ELUSIVE NATURE

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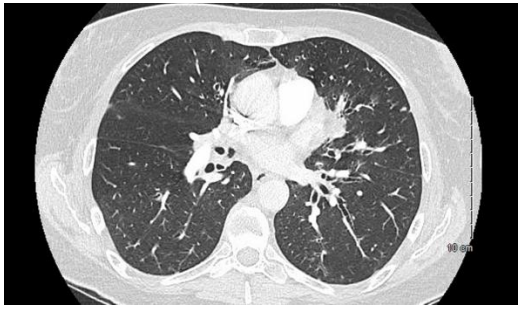
INTRODUCTION

Diffuse lymphadenopathy often represents a diagnostic endeavour with a wide differential, especially when initial investigations do not yield conclusive findings.

CASE PRESENTATION

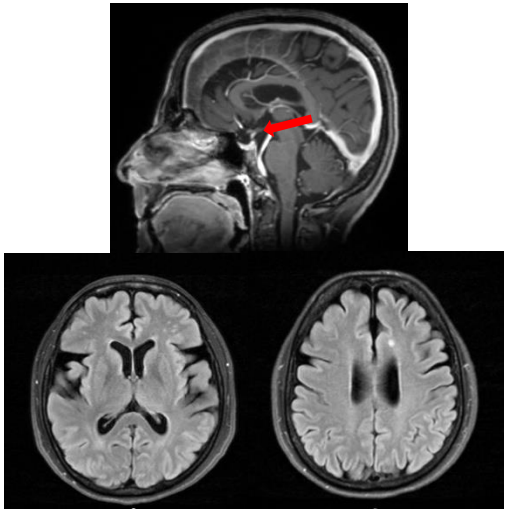
We hereby present the case of a previously healthy 56-year-old female patient, initially hospitalized in late 2023 for severe symptomatic hyponatremia due to viral pneumonia.



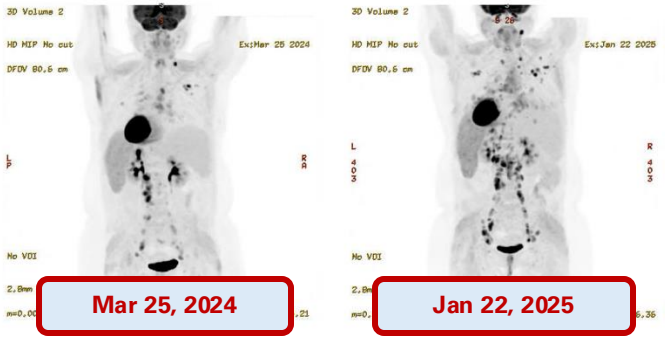
While admitted, chest imaging demonstrated prominent mediastinal and hilar lymphadenopathy, mild splenomegaly and multifocal peri-bronchovascular pulmonary opacities in the lower lung zones.

Further laboratory testing revealed pancytopenia and undetectable immunoglobulin levels. There was no measurable antibody response to tetanus and diphtheria vaccination, leading to a diagnosis of common variable immunodeficiency (CVID).

IMAGING



A pituitary magnetic resonance imaging (MRI) was requested for chronic hyponatremia. Imaging revealed evidence of a 5-millimetre infundibular pituitary stalk enhancement and non-specific subcortical white matter lesions.

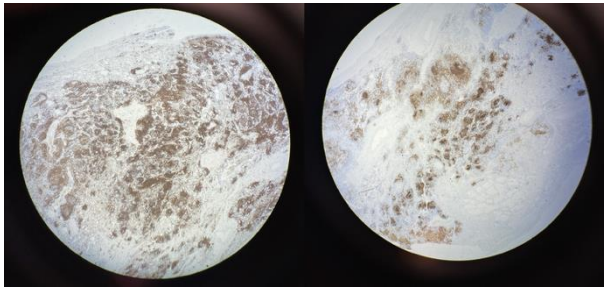


Repeat PET scan over a period of almost one year revealed worsening of lymphadenopathy and ground glass opacities.

PATHOLOGY

Extensive investigations including a bone marrow biopsy, endobronchial ultrasound bronchoscopy and excision lymph node biopsy, failed to yield a definitive diagnosis.

An open lung biopsy ultimately revealed diffuse lymphocytic infiltrates, non-caseating granulomas and organizing pneumonia, consistent with granulomatous and lymphocytic interstitial lung disease (GLILD). The patient was referred for intravenous immunoglobulin infusion and immunosuppressive therapy.



DISCUSSION

GLILD is a rare pulmonary manifestation of CVID that is difficult to diagnose. It is characterized by low or undetectable immunoglobulins, splenomegaly, micronodular disease in the lower lung zones and autoimmune cytopenia.

This case highlights the importance of recognition of immunodeficiency in adults with recurrent infections and lymphadenopathy. It also illustrates how multidisciplinary collaboration can lead to successful diagnoses in a complex and challenging clinical presentation.

Beneath the Flesh, the Answer Sleeps:
An Intriguing Case of Lymphadenopathy of Elusive Nature

Presented by Alexander Calderone

Evidence of Conflict of Financial Interest

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