

Cutaneous B-cell Lymphomas (CBCL)

Overview:

- CBCLs are a heterogeneous group of B-cell lymphomas involving the skin
- The 3 most prevalent subtypes of CBCLs: primary cutaneous follicle center lymphoma (PCFCL), primary cutaneous marginal zone lymphoma (PCMZL), and primary cutaneous diffuse large B-cell lymphoma, leg type (PCDLBCL, LT)
- Both PCFCL and PCMZL are indolent (slow growing) lymphomas are associated with 5-year survival rate of over 95%
- PCDLBCL, LT is an aggressive lymphoma requiring immediate treatment which has poor prognosis
- CBCLs usually present as skin lesions in various parts of the body



SIGNS AND SYMPTOMS

- Lumps or lesions on the skin resembling pimples
- Enlarged lymph nodes in the armpit, neck or groin
- Itchy skin
- Fatigue
- B-symptoms – fever, night sweats, unexplained weight loss (less common)



PSYCHOLOGICAL EFFECTS

- Anxiety related to diagnosis and treatment
- Depression due to emotional and physical burden
- Fear of recurrence or progression
- Body image concerns
- Social isolation
- Loss of self-esteem



Key Stats

- Cutaneous lymphomas are rare, accounting for approximately 5% of all NHL, and primarily affect adults over the age of 50
- Approximately 25% of all cutaneous lymphomas are CBCLs

Treatment Challenges

- In most cases optimal management requires a multidisciplinary treatment approach including dermatology, radiation therapy and systemic treatment
- For indolent CBCLs, treatment commonly includes radiation or skin directed therapies. Chemoimmunotherapy may be used for more advanced cases
- For aggressive CBCLs, high dose chemoimmunotherapy is most often used
- Diagnosis can be challenging due to overlapping symptoms of other non-malignant skin conditions

Clinical Trials

- [Database link](#)

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