

Mantel Cell Lymphoma (MCL)

Overview:

- Type: Rare cancer of the B lymphocytes (B cells) starting in the mantle zone of the lymph node. Typically, an aggressive disease but can behave more indolently in some patients.
- Typically diagnosed as a late-stage disease that has spread to the gastrointestinal tract and bone marrow.
- Commonly Found In: Middle aged or older adults with approximately a three times higher chance for men to be diagnosed.
- There are two main types of variants to MCL, typical or blastoid which proliferate in either a nodular or diffuse pattern.



SIGNS AND SYMPTOMS

- Loss of appetite or upset stomach
- Stomach pains
- Unexplained weight loss
- Fever or night sweats
- Fatigue
- Painless swollen lymph nodes specifically in the neck, armpits, or groin
- Enlarged spleen, liver, or tonsils



PSYCHOLOGICAL EFFECTS

- Anxiety related to diagnosis and treatment.
- Fear of recurrence or progression of the lymphoma.
- Depression due to the emotional and physical burden of the disease.
- Social isolation.
- Loss of self-esteem.



Key Stats

- Most patients with MCL have an overproduction of protein called cyclin D1 in their lymphoma cells. Some patients will also have higher than normal levels of certain proteins that circulate in the blood.
- MCL is rare, occurring in approximately 1 out of 200,000 people per year in the USA.

Treatment Challenges

- Therapies: Chemotherapy in combination or alone, targeted therapy, immunotherapy, radiation therapy, CAR T-cell therapy, and stem cell transplant (for relapse or refractory).
- If MCL is indolent and asymptomatic watch and wait/active surveillance might be suggested.
- MCL is considered incurable however some treatments may be able to achieve remission.

Clinical Trials

- [Database link](#)

Last update

- December 2024