

Marginal Zone Lymphoma (MZL)

Overview:

- Type: Indolent group of B-cell cancers originating in cells present in the marginal zone of lymphoid follicles.
- Affects: Lymph nodes, spleen, blood, bone marrow, stomach and other organs depending on the subtype.
- Average age at diagnosis is 60 years and is slightly more common in women than men. MZL is frequently associated with chronic infections.
- Subtypes: Extranodal marginal zone lymphoma (EMZL) or mucosa-associated lymphoid tissue (MALT) lymphoma, Nodal marginal zone lymphoma (NMZL), Splenic marginal zone lymphoma (SMZL).

SIGNS AND SYMPTOMS

- Fever
- Night sweats
- Unexplained weight loss
- Nausea and vomiting
- Fatigue
- Enlarged spleen
- Stomach pain or feeling full when you haven't eaten

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

- Diagnosis: Detecting MZL and distinguishing between the different types can be difficult but is very important as the three subtypes of MZL share some common features but are still different in their biology, therefore they are likely to respond differently to treatment resulting in varied prognosis.
- In most cases the cancer is slow growing and can be effectively managed with appropriate therapies.

Treatment Challenges

- Common first line therapies: chemotherapy, immunotherapy, chemoimmunotherapy, and targeted therapy (BTK inhibitors).
- Due to these cancers being slow growing, immediate treatment may not be needed, instead health monitoring may occur through watching and waiting or active surveillance.
- Patients should be treated on an individual basis based on symptoms, site of lymphoma and clinical presentation.

Clinical Trials

- [Database link](#)

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