

# UNIDAD DE LINFOMAS

## OBJETIVOS:

-Búsqueda de marcadores pronósticos, diagnósticos y posibles dianas terapéuticas en linfomas T.

-**Dra Rebeca Manso.**

### -Colaboradores:

-Servicio de AP: **Dr Federico Rojo, Dr Piris.**

-Servicio de Dermatología: **Dr Requena, Dra Machan**

-Servicio de Hematología: **Dr Llamas, Dr Cordoba, Dr Nieves-Salgado, Dr Serrano del Castillo, Dr Soto, Dr Blas,**

-Servicios de AP de otros Hospitales de la Red Nacional: **H Puerta de Hierro, H 12 de Octubre, H Gregorio Marañón, H de Valdecilla (Santander), etc...**

-**Dra Margarita Sánchez-Beato. Lymphoma Research Group. IIS Puerta de Hierro-Segovia Arana, Majadahonda, Madrid (IDIPHISA).**

-**Dra Sandra Rodriguez Perales. Molecular Cytogenetic Group, CNIO, Madrid.**

-**Dra Maria Jara-Acevedo. Servicio de Secuenciación de ADN. Unidad de Secuenciación Masiva (Nucleus-USAL), Salamanca.**

-**Grupo Europeo de Clonalidad (Euroclonality).**

-**Red Iberoamericana de Biología Molecular (RED CYTED).**

### -Estancias en Centros Nacionales e Internacionales:

- Hospital Marqués de Valdecilla, Santander (Beca Asociación Española contra el Cancer). Dr Piris (4 meses).
- CAMBRIDGE UNIVERSITY HOSPITAL. Cambridge, UK, Dr Ming Du. (4 meses).
- Centre for Cancer Research, Queen's University Belfast, Belfast, UK. Dr David Gonzalez de Castro (1 mes).

# ARTICULOS EN LOS ÚLTIMOS 5 AÑOS (Unos 70 artículos...)

oncotarget.com Oncotarget, 2018, Vol. 9, (No. 22), pp. 16124-16132

## Overlap at the molecular and immunohistochemical levels between angioimmunoblastic T-cell lymphoma and a subgroup of peripheral T-cell lymphomas without specific morphological features

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<sup>1</sup>Pathology Department, Instituto Cajal IJC, IISGM, Madrid, Spain; <sup>2</sup>Instituto Investigador Barriola Pizarro in Madrid-Región de Aragón (IISIRBA), Madrid, Spain; <sup>3</sup>IC3, Cancer Institute, Department of Research, Hospital Carlos III, Madrid, Spain; <sup>4</sup>Neurociencias Avanzadas IJIC, Biomedical Programs, Spanish Institute of Cancer Research (CNIC), Madrid, Spain; <sup>5</sup>Spanish Institute of Hematology (IISGM), Madrid, Spain; <sup>6</sup>Spanish Institute of Hematology (IISGM), Madrid, Spain; <sup>7</sup>Consorcio de Estudios de Mutaciones Púnicas, email: mrodriguez@icajal.csic.es

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**ABSTRACT**

The overlap of morphology and immunophenotype between angioimmunoblastic T-cell lymphoma (AITL) and nodal peripheral T-cell lymphoma (n-PTCL) is a matter of current interest whose clinical relevance and pathogenic background have not been fully established. We studied a series of 88 n-PTCL samples (comprising 57 AITL and 43 n-PTCL-NOS) with flow T<sub>H</sub> satellite (CD10, BCL-6, PD-1, CXCL13, ICOS), looked for mutations in five of the genes most frequently mutated in AITL (ZFETZ, ZNF743A, ZNF2, RHOA and PDL1) using the Next-Generation-Sequencing Ion Torrent platform, and measured the correlations of these characteristic with morphology and clinical features. The percentage of complete series, mutations in RHOA and ZFETZ genes was similar (23.3% of cases). PDL1 was mutated in 14.3%, ZNF2 in 11.2% and ZNF743A in 3.1% of cases, respectively. In the complete series, mutations in RHOA gene were associated with the presence of mutations in ZNF2, ZFETZ and ZNF743A (P = 0.006, P = 0.004 and P = 0.009, respectively). Fourteen cases featured RHOA mutations without ZFETZ mutations. A close relationship was found between the presence of these mutations and a T<sub>H</sub> phenotype in AITL and n-PTCL-NOS patients. Interestingly, BCL-6 expression was the only T<sub>H</sub> marker differentially expressed between AITL and n-PTCL-NOS cases. There were more flow mutated cases than there were cases with a T<sub>H</sub> phenotype. Overall, these data suggest alternative ways by which neoplastic T-cells overexpress these proteins. On the other hand, no clinical or survival differences were found between any of the recognized subgroups of patients with respect to their immunohistochemistry or mutational profile.

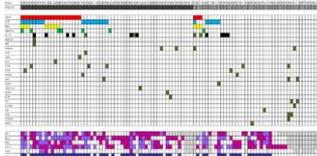


Figure 1: Representative profiles between mutations of selected genes and T<sub>H</sub> phenotype in n-PTCL according to PDL1 expression. Each row: AITL, Light green; n-PTCL, Dark blue; T<sub>H</sub> phenotype, White; n-PTCL expression, PDL1, 100% (Light green; White)

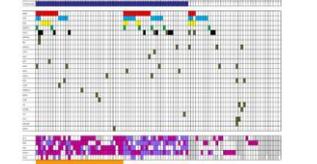


Figure 2: Representative profiles between mutations of selected genes and RHOA in n-PTCL according to presence of T<sub>H</sub> phenotype. Each row: AITL, Light green; n-PTCL, White; RHOA expression, RHOA, 100% (White; T<sub>H</sub> phenotype, 100% (Light green; White)

## Tesis Doctoral. Dra Rebeca Manso (Conchita Rábago)

### bjh

#### Clinical and pathological characteristics of peripheral T-cell lymphomas in a Spanish population: a retrospective study

**Rebeca Manso Rodríguez-Piñilla** <sup>1</sup> **Abstract**

We investigated the epidemiological features and prognostic factors of primary cutaneous T-cell lymphoma (CTCL) in a low cancer incidence population. We retrospectively analyzed 104 cases of primary cutaneous T-cell lymphoma (CTCL) in a tertiary care center. The most frequent histological subtype was lymphomatoid papulosis (LP), followed by mycosis fungoides (MF) and Sézary syndrome (SS). The median age at diagnosis was 65 years. The most frequent clinical presentation of LP patients had a history of recurrent self-healing nodules, most involving the face. Immunohistochemical studies showed a CD4<sup>+</sup>CD8<sup>-</sup> phenotype. The median survival was 10.5 years. The most frequent histological subtype of MF patients was the patch/plaque type. The most frequent clinical presentation was a slowly progressive erythematous and scaly eruption. The most frequent histological subtype of SS patients was the leukemic type. The most frequent clinical presentation was a progressive erythematous and scaly eruption. The most frequent histological subtype of SS patients was the leukemic type. The most frequent clinical presentation was a progressive erythematous and scaly eruption.

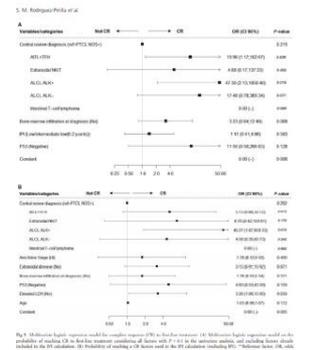
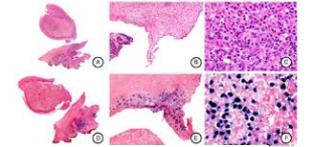


Fig. 3: Mutations profile according to histological subtype. AITL, Angioimmunoblastic T-cell lymphoma; n-PTCL, nodal peripheral T-cell lymphoma; ZFETZ, Zinc Finger E2F7 Target 2; ZNF743A, Zinc Finger Nucleo Domain 743; ZNF2, Zinc Finger Nucleo Domain 2; RHOA, Ras Homology Domain A; PDL1, Programmed Death 1.

ORIGINAL ARTICLE

## The Spectrum of EBV-Positive Mucocutaneous Ulcer A Study of 9 Cases

Lucía Prieto-Torres MD,<sup>1</sup> Izziar Eranha MD,<sup>2</sup> Rocío Gil-Redondo MD,<sup>2</sup> Inés Gómez de la Riva MD,<sup>3</sup> Rebeca Manso PhD,<sup>3</sup> Raquel Pajares-Rodríguez MD PhD,<sup>4</sup> Salmá Machón MD,<sup>5</sup> Mariano Arca MD PhD,<sup>6</sup> Luis Requena MD PhD,<sup>7</sup> Miguel A. Piris MD PhD<sup>8</sup> and Socorro M. Rodríguez-Piñilla MD PhD<sup>9</sup>

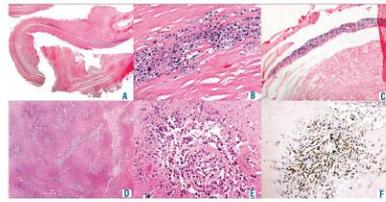


**Abstract:** We describe a series of 9 patients with Epstein-Barr virus (EBV)-positive mucocutaneous lymphoproliferative lesions that broadens the concept of EBV-positive mucocutaneous ulcer. We report 5 female and 4 male patients with an average age of 74 years (range, 55 to 87 y), 2 of whom were HIV-positive. The lesions were located in the oropharynx, skin, and rectal and/or genital mucosa. Histopathologically, 6 cases showed a polymorphic pattern and 3 had a monomorphic and diffuse one, with angiotropism in 4 cases (2 each with the polymorphic and monomorphic patterns). Three of the cases expressed PDL1. In addition to its presence in the neoplastic lymphoid cells, EBV was also detected in adjacent epithelial cells in an oropharyngeal lesion. All cases responded to local therapy or adapted systemic chemotherapy in selected cases. This series extends the spectrum of this disorder to include some HIV-positive cases, patients with multiple lesions confined to a single anatomic area, lesions with an angiotropic pattern, and some cases with monomorphic large-cell cytology. We discuss the differential clinicopathologic diagnosis of the disorder and that of classic EBV large B-cell lymphoma.

**Key Words:** mucocutaneous ulcer, EBV, immunosuppression, genital lesions, lymphoproliferative disorders  
(Am J Surg Pathol 2019;43:201–210)

### LETTERS TO THE EDITOR

#### Great implant-associated Epstein-Barr virus-positive large B-cell lymphoma: a report of three cases



**Socorro María Rodríguez-Piñilla**, **Fernando Javier Sánchez García**, **Olga Rábago**, **Manuel Rodríguez-Juárez** and **Miguel Ángel Piñón**

<sup>1</sup>Fundación Jiménez Díaz, Pathology Department, CIBERONIC, Madrid, Spain; <sup>2</sup>Hospital Clínic de Barcelona, Pathology Department, Barcelona, Spain and <sup>3</sup>University College London Hospital, Pathology Department, London, UK

*Funding:* this work was supported by grants from the Instituto de Salud Carlos III (ISCIII) of the Spanish Ministry of Economy and Competitiveness (ISCIII), CIBERONIC, ISCIII and CIBERSAM. **GARCÍA FJ, RÁBAGO O, RODRÍGUEZ-PIÑILLA SM, SÁNCHEZ FJ and SANZ VJ (2019) Great implant-associated Epstein-Barr virus-positive large B-cell lymphoma: a report of three cases. *Am J Surg Pathol* 43:201–210.**

**Correspondence:** SOCORRO MARÍA RODRÍGUEZ-PIÑILLA [mrodriguez@icajal.csic.es](mailto:mrodriguez@icajal.csic.es)

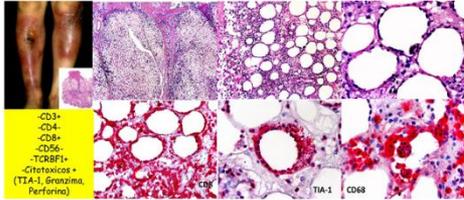
doi:10.1186/s12928-019-2235-5

*Information on authorship, contributions, and financial or other disclosures was provided by the authors and is available with the online version of this article at [www.biomedcentral.com/submit](http://www.biomedcentral.com/submit).*

# II REUNIÓN ANUAL DE ÁREAS Y GRUPOS DEL IIS-FJD 13 de Noviembre del 2020

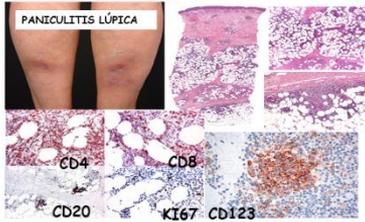
# PROYECTOS Y PERSPECTIVAS

## LINFOMA T PANICULITICO



**PROYECTO FISH (PI16/2172)**  
**LINFOMA T PANICULITO Y SIMULADORES. MARCADORES MOLECULARES DE DIAGNOSTICO Y TERAPIA DIRIGIDA.**

Dra Salma Machan (Servicio de Dermatología)



**Subcutaneous Panniculitis-Like T-Cell Lymphoma With Overlapping Clinicopathologic Features of Lupus Erythematosus: Coexistence of 2 Entities?**

Laura B. Pincus, MD,\* Philip E. LeBlat, MD,\*\* Timothy H. McCalmont, MD,\* Roberto Riccì, MD,† Carlos Bucio, MD,‡ Lindy P. Fox, MD,\* Fergús Óliver, MD,\* and Lorenzo Cerroni, MD\*

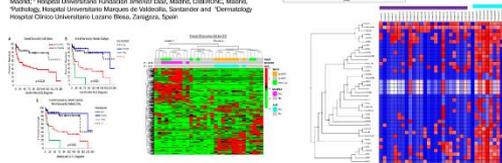
**Abstract:** We observed 5 patients with subcutaneous panniculitis-like T-cell lymphoma (SPTCL) who were unusual, in that they also exhibited features of lupus erythematosus (LE). This observation is in keeping with a recent study that reported an increased rate of cutaneous disease, including systemic lupus erythematosus (SLE), among patients with SPTCL. In all cases, antibodies indicating SPTCL included an infiltrate of lymphocytes with pleomorphic nuclei involving subcutaneous lobules exhibiting a cytotoxic T-cell (CD3/CD8 [T1]) immunophenotype. Additionally, a high proliferation rate and a monoclonal T-cell receptor gene rearrangement

into SPTCL, with biopsy of any subcutaneous lesion that is not typical of LE. Additionally, screening for cutaneous LE and SLE could be considered in patients with SPTCL.  
**Key Words:** cutaneous T-cell lymphoma, lupus erythematosus, lupus panniculitis, lupus profundus, subcutaneous panniculitis-like T-cell lymphoma  
*(Am J Dermatopathol 2009;31:320-326)*

## LINFOMAS CUTANÉOS CON EXPRESIÓN DE CD30. CLASIFICACIÓN, PRONÓSTICO Y TERAPIAS DIRIGIDAS

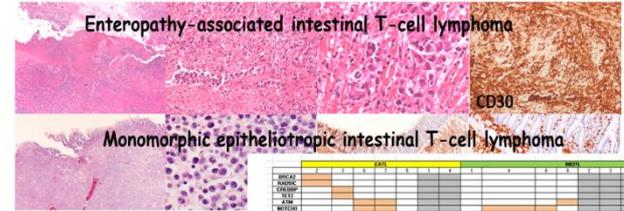
### CD30-positive primary cutaneous lymphoproliferative disorders: molecular alterations and targeted therapies

Lucía Prieto-Torres,<sup>1</sup> Soemmo M. Rodríguez-Piñella,<sup>2\*</sup> Arantxa Oveánsola,<sup>3</sup> Mariano Aza,<sup>4</sup> Luis Requena,<sup>5</sup> and Miguel A. Piris<sup>6\*</sup>  
 Departments of <sup>1</sup>Dermatology, <sup>2</sup>Pathology, Hospital Universitario Fundación Jiménez Díaz, <sup>3</sup>Immunology, <sup>4</sup>Dermatology, <sup>5</sup>Hospital Universitario Fundación Jiménez Díaz, Madrid, <sup>6</sup>IBERPEINIC, Madrid, <sup>7</sup>Pathology, Hospital Universitario Marqués de Valdecilla, Santander and <sup>8</sup>Dermatology, Hospital Clínico Universitario Lozano Blesa, Zaragoza, Spain



Tesis Doctoral.  
 Dra Lucia Prieto.  
 Río Ortega

## PERFIL MOLECULAR DE LOS LINFOMAS T PRIMARIO INTESTINALES

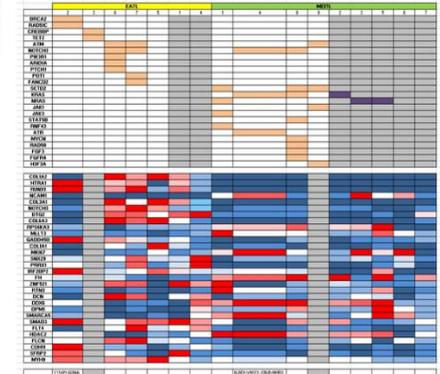


bjh research paper

Clinical and pathological characteristics of peripheral T-cell lymphomas in a Spanish population: a retrospective study



■ PTCL ALL TOGETHER (149)  
 ■ INTESTINAL T-CELL LYMPHOMAS (12/161) (7.45%)



INCORPORAR NUEVA ESTUDIANTE PREDOCTORAL.

II REUNIÓN ANUAL DE ÁREAS Y GRUPOS DEL IIS-FJD  
 13 de Noviembre del 2020

UAM Universidad Autónoma de Madrid

Hospital Universitario Fundación Jiménez Díaz

IIS FJD

INSTITUTO DE INVESTIGACION SANITARIA FUNDACION JIMENEZ DIAZ

Grupo Quironsalud

# COLABORACIÓN

## -Oferta:

- Estudio histológico.
- IHC, TMA.
- FISH
- Secuenciación genómica (paneles dirigidos). Ion Torrent, Miseq, nanostring...
- RNA seq
- Expresión génica (Nanostring, Fluidim, RT-PCR).

## -Demanda:

- Estudio en células tumorales individuales. Sorter.
- Estudio in vivo con modelos animales.

# Actualización en Linfomas Cutáneos IV Edición

7 y 8 de mayo de 2020

Sede: Aula Magna de la FJD,  
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Hospital Universitario  
**Fundación Jiménez Díaz**  
Grupo **quirónsalud**

## CURSOS/CONGRESOS QUE ORGANIZAMOS

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