

Learning Objectives:

By the end of the CBL, students will be able to

1. Define Lymphadenopathy
2. Identify different causes of lymphadenopathy
3. Describe the mechanism of lymphadenopathy
4. Explain different types of lymphnodes

CBL. SCENARIO

A 28-year – old woman is referred to the medical OPD with complaints of enlarging lump on the left side of neck and low grade fever for 2 months and is extremely anxious about what might be wrong. There is no previous history of note and she takes no regular medications.

She denies any previous upper respiratory tract infection and has no oropharyngeal symptoms of note. She does, however, admit to 2 weeks of exertional breathlessness and has noticed a weight loss of 3 Kg over the last 1 month.



On examination patient looks pale and has temperature of 100F. Examination of scalp, ears and oropharynx is normal. There is a 3x3 cm left cervical chain lymph node, non tender, matted, firm in consistency. No convincing lymphadenopathy in either axilla. Examination of abdomen reveals no enlargement of liver or spleen. Chest exam is unremarkable.

Blood CP Report is as follows:

Haemoglobin	9gm/dl
MCV	80fl
White blood cell count	9000/cmm
Neutrophils	60%
Lymphocytes	40%
Platelets	324000/cmm
ESR	66 /1st hour

Chest X-ray PA VIEW is unremarkable.

Q1. What clinical findings are present in this patient?

Q2. What are the causes of cervical lymph node enlargement?

Q3. What initial investigations you would like to advice?

Q4. What are the findings on blood CP report?

Q5. Which other investigations you would advise?

Ultrasound abdomen is normal with no evidence of any visceromegaly or lymphadenopathy.

Serum LDH is normal.

Q6 .Now what should be done to make a diagnosis?

Q7. Describe the location and drainage area of various groups of cervical lymph node.

Q8. What histopathological findings would you expect in your patient?