LYMPHOMA

Lymphoma is a cancer of the lymph nodes or other lymphatic tissue. The main types are Hodgkin’s lymphoma and non-Hodgkin’s lymphoma. Hodgkin’s lymphoma, first described in 1832 by the English doctor Thomas Hodgkin, is the most common form of lymphoma in adolescents, whereas younger children are more likely to suffer from non-Hodgkin’s lymphoma.

SYMPTOMS

Most common symptom is rapid but painless swelling of the lymph nodes.

DIAGNOSIS

Diagnosis primarily involves taking a sample from the tumour (biopsy) and studying it, including under a microscope. In addition there are a variety of blood tests and scans such as CT, MRI, PET and ultrasound. A bone marrow examination is also performed.

TREATMENT

Advances have been made in the treatment of Hodgkin’s lymphoma. Nowadays treatment generally involves various combinations of chemotherapy drugs. Radiotherapy always used to be given too, but these days treatment protocols with less radiation are used, which means that some children do not need any radiotherapy. Non-Hodgkin’s lymphoma, which is generally fast-growing, is normally treated with intensive long-term chemotherapy. This intensive therapy means that some children’s growth will be arrested during the treatment period. However, these children catch up again once the treatment is over, and their final height is not affected. Chemotherapy can result in reduced fertility in boys treated for Hodgkin’s lymphoma. How greatly it is reduced depends on the treatment given and the age of the patient. New treatment protocols are now being used to reduce the risk of infertility. Medical technology has advanced in this area too.

PROGNOSIS

Most of those treated for Hodgkin’s lymphoma are cured. Hodgkin’s lymphoma is rare in children, with fewer than 15 per cent of cases in children under the age of 14. Under the age of ten, the disease affects boys more often than girls, but the difference then evens out, with the disease peaking in boys in early puberty and in girls in their late teens. Non-Hodgkin’s lymphoma is the type of cancer with the most-improved prognosis over the past 20 years. In the 1970s, only 15-20 per cent of children survived, whereas most are now cured. This is down to more intensive chemotherapy which melts away the tumour. The disease is not hereditary. Those who have lymphoma in childhood do not need to worry about their own children developing the disease or being malformed: the risk is no greater than for anyone else.