bendamustine treatment, and the lesion in the right orbit was not observed in the current follow-up imaging after 3 cycles of treatment. (Fig. 1B) The patient continued with rituximab and bendamustine treatment. **Case 2:** When the 52-year-old female patient first appeared two years ago, a conjunctival biopsy revealed that she had EMZL. Radiotherapy was recommended for her localized disease, but she declined it. She received eight cycles of rituximab treatment and was monitored in remission. One year later, salmon-colored lesions were found in the inner corner of both eyes. EZML was also found in the new biopsy. There was no ocular involvement. The patient received 6 cycles of rituximab bendamustine and maintenance rituximab for recurrent and bilateral lesions. We are currently monitoring the patient and the disease is in complete remission. **Discussion:** Lymphoma is one of the most frequently occurring malignant tumors of the conjunctiva. In patients with lesions that like a "salmon patch" and unexplained chronic follicular conjunctivitis, lymphoma should be suspected.

(Fig. 1A) (Fig. 1B)

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A RARE CASE: NODAL FOLLICULAR T HELPER CELL LYMPHOMA, ANGIOIMMUNOBLASTIC TYPE

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Objective: Angioimmunoblastic T-cell lymphoma (AITL) is the second most common subtype of mature T-cell lymphoma (MTCL). It is caused by monoclonal proliferation of T-follicular helper (TFH) cells. Although advances have been made in its biological knowledge, its treatment is still an unmet medical need. We would like to present a case of Nodal-TFH; AITL that we followed in our clinic. **Case Report:** A 67-year-old male patient presented with cough. Thorax CT revealed left supraclavicular-mediastinal multiple lymphadenopathy with pleural effusion. Supraclavicular LN excision was reported as NHL; nodal follicular T helper cell lymphoma, angioimmunoblastic type. Immunohistochemical CD3, PD-1 and CXC13 were positive, CD4, CD8 and CD10 were sparse, CD21 and 23 were positive in increased dentritic cells, CD20, CD30, EBER and IDH-1 were negative. PET-CT revealed Stage 4BS (multiple LNs with FDG uptake in head-neck, thorax-mediastinum and abdominopelvic FDG uptake, increased FDG uptake in bone marrow-spleen; B symptom: positive). Subcutaneous (sc) Azacitidine + intravenous CHOP (cyclophosphamide, doxorubicin, vincristine, prednisone) was started. The 1st course of azacitidine was administered at 75 mg/m2 for 7 days 1 week before CHOP treatment and the following courses were administered at 75 mg/m2 for 14 days 2 weeks before CHOP treatment. After 4 cycles of Azacitidine+CHOP, PET-CT regressed and 2 more cycles of treatment were administered. During the follow-up, the patient's general condition deteriorated and he went into septic shock. **Discussion:** AITL-containing T-follicular helper; nodal PTCL is characterized by recurrent mutations affecting epigenetic regulators. The association of abnormal DNA methylation with lymphomagenesis provides rationale for the administration of hypomethylating agents. The epigenetic modifier azacitidine, which inhibits DNA methyltransferase, has demonstrated clinical activity alone or in combination in relapsed/refractory PTCL. In a phase-2 clinical trial of 20 patients who experienced oral azacitidine + CHOP as initial treatment for PTCL, CR was 76.5%, 1-year PFS 61.1%, 1-year OS 88.9%. In our case, we added the hypomethylating agent azacitidine to the CHOP protocol and aimed to evaluate the efficacy of this combination in the initial treatment of CD30 negative PTCL.

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SINGLE-CENTER EXPERIENCE IN DIFFUSE LARGE B-CELL LYMPHOMA: PROGNOSTIC VALUE OF DEMOGRAPHIC AND MOLECULAR CHARACTERISTICS

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İntroduction: Diffuse large B-cell lymphoma (DLBCL) is a heterogeneous hematological malignancy, accounting for approximately 30% of all lymphomas, and is associated with diverse clinical outcomes. The onset of DLBCL typically occurs in the sixth decade of life, with a higher incidence in males. The morphological, clinical, and biological diversity of DLBCL underscores the presence of multiple subtypes, each exhibiting distinct behavior. **Objective:** The objective of this study is to assess the demographic characteristics and clinical outcomes of DLBCL patients, as well as to evaluate the prevalence and prognostic significance of MYC and BCL2 co-expression on survival. **Methodology:** A retrospective study was performed on 51 patients with a confirmed diagnosis of DLBCL. We conducted an analysis of the demographic data