

Variable list and codes in the study Etiology, risk factors, clinical features of childhood, Non-Hodkins Lymphomas in Uganda

Name of variable	Variable Description	Codes (values, range etc)
Common variables in Questionnaire 1, 2, 3		
SUBJECT	Participant's ID-number	The value as 999999999 means that the patient has not any record in the file regardint to submission of samples (Overview)
Q_ID	Questionnaire's ID	
SRNO	Serial number for all subjects	
SNO_BASE	Study NUMBER (demographic questionnaire)	
SNO_CLINICAL	Study NUMBER (clinical questionnaire)	
Questionnaire 1		
Q_ID ; Q_ID1_2;Q_ID_3	Unique number created for all questionnaires	
SNO_CLINICAL	Study NUMBER (clinical questionnaire)	
FNAME	Family name of the child	Name
ONAME	Given name of the child	Name
DATABASE_IDNO		
PI_IDNO		
HNO_BASE	Hospital NUMBER (demographic questionnaire)	Number
HNO_CLINICAL	Hospital NUMBER (Clinical questionnaire)	Number
INITIALS_ID	first character of surname and first character of forename	
ECODE_BASE	Enrollment code (demographic questionnaire)	A=Case, B= Tumor control, C=Non Tumor Control D= No diagnosis
ECODE_CLINICAL	Enrollment code (clinical questionnaire)	A=Case, B= Tumor control, C=Non Tumor Control D= No diagnosis
DIAGNOSIS	Diagnosis	A=Case, B= Tumor control, C=Non Tumor Control D= No diagnosis
ENO_CLINICAL	Enrollment NUMBER(clinical questionnaire)	
DDATE	Diagnosis date	
EDATE	Enrollment date	
NAME	Name of person who administered questionnaire to participant	Name
NAME2	Name of person who volunteered information for interview	Name

RELATION	Relation to the Child of the person who volunteered information for interview	1=Mother 2= Father 3= Guardian 4= Others Specify
OTHER1	Other relations to the child other than that listed	Other1 Specified
AGE	Age of the child	years
DOB	Date of birth of the child	
SEX	Sex of the child	1=Male 2=Female
NAMEM	Name of the biological mother of the child	Name
STATUSM	Status of mother of child alive or dead	1=Alive 2=Dead
DODM	If mother is dead date of death	
CAUSEM	If mother is dead cause of death	1=HIV 2= Malaria 3= Child birth 4= Unkown 5= Other Specify
OTHER2M	Other specific about cause of death	Others Specified
AGEYR	If mother is dead age in years of child at death of mother	Years
AGEMO	If mother is dead age in months of child at death of mother	Months
NAMEF	Name of the biological father of the child	Name
STATUSF	Status of father of child alive or dead	1=Alive 2=Dead
DODF	If father is dead date of death	
CAUSEF	If father is dead cause of death	1=HIV 2= Malaria 3= Child birth 4= Unkown 5= Other Specify
OTHER2F	Other cause of death of biological father if not one listed	Others Specified
TRIBE	Tribe of the child	Specific tribe from Uganda
REGION	Region of the country where the child was born	East, West, Central etc
DISTRICT	Region of the country where the child was residence at beginning of illness	Specific district from Uganda
NEIGB	Neighbourhood of the child at the onset of illness	1=1000 houses, 2= 100-1000 houses 3=10-100 houses 4=10 houses
LONGYRS	Duration of stay in years at current neighbourhood at the onset of illness	years
LONGMO	Duration of stay in months at current neighbourhood at the onset of illness	months
SCH	Whether child was attending school at onset of illness	1=Yes 2=No
SCHLEV	If attending school the level?	1= None, 2=Pre-school, 3= lower primary 4= upper primary 5= Other
CLASS	If attending school class?	Lower primary =1, 2, 3 or 4 Upper Primary= 5,6, 7

RELIGION	What religion is the child	1= Protestant, 2=Catholic, 3= Moslem 4= Born Again, 5= Traditional religion, 6= Others specify
INCOME	Yearly family income in Uganda Shillings	Number
ADULTS	Number of adults living in same household as the child	Number
CHILDREN	Number of children living in same household as the child	Number
BROS	Brothers of the child	Number
SIS	Sisters of the child	Number
SHARE_SHARE	Do all siblings share the same mother and father	1=Yes 2=No
SHAREM	How many siblings share the same mother	Number
SHAREF	Howmany siblings share the same father	Number
SUFFER0	Any child in the household ever suffered lymphnode swellings	1=Yes 2=No 3=Don't Know
SUFFER1	Any child in the neighbourhood ever suffered suffer from similar illenes as the current patient	1=Yes 2=No 3=Don't Know
SUFFER2	Did any child at the school suffer the same illness at the time as the current patient	1=Yes 2=No 3=Don't Know
SUFFER3	Any sibling ever suffered lymphnode swellings	1=Yes 2=No 3=Don't Know
LONGYRS1	Duration of glandular illness in years	years
LONGMO1	Duration of glandular illness in months	Months
SUFFER4	Occurance of jaw swelling within the family of the child	1=Yes 2=No 3=Don't Know
SUFFER5	Occurance of jaw swelling in the neighbourhood of the child	1=Yes 2=No 3=Don't Know
FLUEF	Oubreak of flue like illness among children	1=Yes 2=No
FLUES	Oubreak of flue like illness among children in family of the child	1=Yes 2=No
FLUEN	Oubreak of flue like illness among children in school	1=Yes 2=No
SMOKER	Any cigaret smoker within the family	1=Yes 2=No
SMOKER1	Particular member of family who smoes(mother or Father)	1=Father 2= Mother 3= Both father and mother 4= Other Specify
OTHER3	Any other member of family who is a smoker	Specify
ALCOH	Making and selling of alcohol within the family	1=Yes 2=No
DRINK	Many visitors within the family	1=Yes 2=No
DRINKN	If many visitors how many?	Number per week
MIX	Whether children mix freely with visitors to the household	1=Yes 2=No
MEALS	Children shareing meals and eats freely from common pool with adults	1=Yes 2=No
MEALS2	Chewing food by adults to soften before giving to children	1=Yes 2=No
CASAVA	before giving to children	1=Yes 2=No

MATOOKE	before giving to children	1=Yes 2=No
BEEF	before giving to children	1=Yes 2=No
POTATOES	before giving to children	1=Yes 2=No
OTHER4	before giving to children	1=Yes 2=No
COMM	Children and adults sharing food from a communal bowl and dishes;Practice of eating using hands from a common bowl(increases chances of inoculation)	1=Yes 2=No
TRANS	History of blood transfusion to the child	1=Yes 2=No
REAS	Indication for blood transfusion	1=Lack of blood 2= Malaria 3= Other Specify
OTHER5		Other reason specified
TIMES	Number of times ever the child been transfused	number 0=never, 99= don't know
INJECT	History of multiple injections	1=Yes 2=No
TIMES2	How many times the child has been injected	number of times 0=never, 99= don't know
FEV	Indication for injections was fever	1=Yes 2=No
MALARIA	Indication for injections was malaria	1=Yes 2=No
DIARR	Indication for injections was diarrhea	1=Yes 2=No
OTHER6	Indication for injections was others	1=Yes 2=No
BFED	History of child breastfed/breastfeeding	1=Yes 2=No
LONGYRS2	duration of breastfeeding in years	years
LONGMO2	duration of breastfeeding in months	Months
COW	Weaning diet was cow milk; Food given after stoping breast feeding	1=Yes 2=No
FORMULA	Weaning diet was formula	1=Yes 2=No
PORRID	Weaning diet was porridge	1=Yes 2=No
OTHER7	Weaning diet was others	1=Yes 2=No
SORES	Development of small wounds in the mouth	1=Yes 2=No
SORES2	Development of small wounds on the skin	1=Yes 2=No
TRAD	Child was taken to a traditional healer for treatment	1=Yes 2=No
LONGYRS3	Age of the child at which the visit to the tradional healer was made in years	
LONGMO3	Age of the child at which the visit to the tradional healer was made in months	
SCAR	Cuts made on the skin or body as part of therapy	1=Yes 2=No
BODY	Anatomical part of the body on which the marks were made	Arm, abdomen , face etc

CUT	Precise site of the cut	Arm, abdomen , face etc
HERB	Medicinal herbs applied following cut	1=Yes 2=No
COMMX	The name of the medicinal plan applied	1=Yes 2=No
TEETH	Practice of removing premodial buds of the teeth	1=Yes 2=No
LONGYRS4	Age of the child when this was done in years	
LONGMO4	Age of the child when this was done in months	
TRADMED	Any other medicine given in addition to the one above	1=Yes 2=No
NAMES1	Traditional name of medicine1	
NAMES2	Traditional name of medicine2	
NAMES3	Traditional name of medicine3	
NAMES4	Traditional name of medicine4	
ANYUSE	Whether these plans are common in the village	1=Yes 2=No
VALUES_VALUES	Common medicinal use in the villages	1=Yes 2=No
USE1	Traditional medicinal value 1	
USE2	Traditional medicinal value 2	
USE3	Traditional medicinal value 3	
THERA	Any othe traditional herbal therapy in mind that is commonly used for childhood illnesses in the community; Any other traditional herbs commonly use for childhood illness	1=Yes 2=No
NAMES5	Traditional name of medicine5	
NAMES6	Traditional name of medicine6	
NAMES7	Traditional name of medicine7	
INDIC5	Indications for traditional medicines5	
INDIC6	Indications for traditional medicines6	
INDIC7	Indications for traditional medicines7	
ADMIN5	The route used of administration of the additional plant (mouth)	
ADMIN6	The route used of administration of the additional plant (cuts)	
ADMIN7	The route used of administration of the additional plant (rubbing)	
DAENT	Data entrant	
Questionnaire 2		
FEVER	Fever as a general symptom	1=Yes 2=No
DUR_1	Duration of fever in weeks	
SWEATS	Night sweats as a general symptom	1=Yes 2=No

DUR_2	Duration of night sweats in weeks	
WTLOSS	Weight loss as a general symptom	1=Yes 2=No
DUR_3	Duration weight sweats in weeks	
HALITO	Halitosis as a general symptom	1=Yes 2=No
GSWELLING	Gland swellings as a general symptom	1=Yes 2=No
OTHER_61	Other general syptoms1 (as specified)	
OTHER_62	Other general syptoms2 (as specified)	
OTHER_63	Other general syptoms3 (as specified)	
FACIAL	Facial tumor	1=Yes 2=No
SITE	Facial site	Quadrant 1=Maxillary, Quadrant 2=Mandible Quadrant 3= Orbital Quadrant 4 = No jaw tumor
QUAD	Facial quadrant	Number of quadrant involved 1, 2, 3 and 4 respective
VAR145	Teeth involvement	1=Yes 2=No
TEETH2	Nature of teeth involvement	If yes 1= loose teeth, 2=Falling off, 3= Gumm bleeding 4= All stated above, 9= teeth not examined
JAW	Jaw x-ray done	1=Yes 2=No
JAW2	Extent of jaw involvement	If yes 1= loose teeth, 2=Falling off, 3= Gumm bleeding 4= other to be specified
JAW2_OTHER	Other jaw involvement (To be specified)	
ORBITAL	Orbital involvement	1=Yes 2=No
ORBITAL2	Orbital side involved	If yes 1=right, 2=left 3= both
EXTRA	Extra facial tumor	1=Yes 2=No
BREAST	Breast mass	1=Yes 2=No
ABD	Abdominal disease	1=Yes 2=No
SPLENIC	Splenic mass	1=Yes 2=No
SIZE1	Spleen size in cm	
HEPATIC	Hepatic mass	1=Yes 2=No
SIZE2	liver size in cm	
OVA	Ovarian mass	1=Yes 2=No
SIZE3	ovarian size in cm	
MESENT	Mesenteric or other masses	1=Yes 2=No
SIZE4	size of nodes or other masses in cm	

RENAL	Renal mass	1=Yes 2=No
ASCITES	Ascites	1=Yes 2=No
CERVICAL	Cervical lymphnodes	1=Yes 2=No
SUPRA	Supra clavicular nodes	1=Yes 2=No
AXILL	Axillary lymphnodes	1=Yes 2=No
INQUINAL	Inguinal lymphnodes	1=Yes 2=No
OTHER_S1	Other sites of disease1 (To be specified)	
OTHER_S2	Other sites of disease2 (To be specified)	
OTHER_S3	Other sites of disease (To be specified)	
HEAD	Disease on head	1=Yes 2=No
NECK	Disease on the neck	1=Yes 2=No
TRUNK	Disease on the trunk	1=Yes 2=No
ARMS	Disease on the arms	1=Yes 2=No
TESTIS	Disease on the testis	1=Yes 2=No
MEDIA	Mediastinal tumor	1=Yes 2=No
SUB	Subdiaphragmatic tumor	1=Yes 2=No
OTHER_L1	Other specify 1 (To be specified)	
OTHER_L2	Other specify 2 (To be specified)	
SPLEN	Spleen involvement	1=Yes 2=No
LIVER	Liver involvement	1=Yes 2=No
BONE	Bonemarrow involvement	1=Yes 2=No
BLOOD	Blood involvement	1=Yes 2=No
THYR	Thyroid tumor	1=Yes 2=No
LUNG	Lung tumor	1=Yes 2=No
GASTRIC	Gastric lymphoma	1=Yes 2=No
OVARY	Ovarian involvement	1=Yes 2=No
COLO	Colorectal lymphoma	1=Yes 2=No
KIDNEY	Kidney involvement	1=Yes 2=No
BONES	Bone involvement	1=Yes 2=No
CERE	Cerebral involvement	1=Yes 2=No
CEREB	Cerebral spinal fluid	1=Yes 2=No
SKIN	Skin involvement	1=Yes 2=No
ORBIT	Orbital tumor	1=Yes 2=No

OTHER_G1	Other extranodal sites of disease 1 (To be specified)	
OTHER_G2	Other sites of disease2 (To be specified)	
HIST	Histologic type	
HIST_COD	Histology code	
SITE_BIO	Site of biopsy (To be specified)	
SITE_COD	Site code	
BIO_DT	Date of biopsy	
CYTO	Cytology	1=Yes 2=No
LYMP	Lymphnode	1=Yes 2=No
NODAL	Extra nodal	1=Yes 2=No
BLOODD	Blood	1=Yes 2=No
MARROW	Marrow	1=Yes 2=No
OTHER_K1	Other sites 1 (To be specified)	
OTHER_K2	Other specify 1 (To be specified)	
PHY	Physical examination	1=Yes 2=No
XRAY	XRAY	1=Yes 2=No
ULTRA	Ultra sound	1=Yes 2=No
ENDO_ENDO	Endoscopy	1=Yes 2=No
COMPU	CT Scan	1=Yes 2=No
OPER	Operative procedure	1=Yes 2=No
VAR216	Data entrant	
Questionnaire 3		
V1A	Given name of the child	
V1B	Family name of the child	
V1	Stage of disease for follow-up data	1=A, 2= B, 3= C 4= D 5= AR
V1A1	Staging for cancer if different from BL	
V2	Reported HIV status for follow-up data	1= HIV+, 2= HIV - 3= Status unknown
V3	HIV staging	1=I, 2= II, 3= III 4= IV 5= NA
V4	CD4 counts for follow-up data	
V5	Antiretroviral treatment in follow-up data	1= Yes, 2= No - 3= Unknown
V6A	Specific chemotherapy combination a	
V6B	Specific chemotherapy combination b	

V6C	Specific chemotherapy combination c	
V6D	Specific chemotherapy combination d	
V7	Complete blood counts	
V7B	Hemoglobin	
V7C	Platelet counts	
V8	Serum Alanine transaminase	1= Yes, 2= No
V8B	Serum Aspartase Transaminase	1= Yes, 2= No
V8C	Lactic Dehydrogenase	1= Yes, 2= No
V9	Body surfaxce area in meter squared	
V10	Date initial cycle of chemotherapy was given	
V11	Date final treatment was given	
V12	Number of cycle of chemotherapy given	
V13	Disease response after completing treatment	1=CR, 2= PR, 3= SD 4= PD 5= NA (CR Complete response, PR Partial response SD stable disease NA Not assessed)
V14	Disease coming back after response	1= Yes, 2= No - 3= Unknown
V15	Disease free duration before relapse (in months)	
V15A	Specific duration in time period	
V16	Part of the body relapse ocured (Stated site of relapse1)	
V16B	Part of the body relapse ocured (Stated site of relapse2)	
V17A	Treatment given to treat relapse disease (Specific secondline chemotherapy combination a)	
V17B	Treatment given to treat relapse disease (Specific secondline chemotherapy combination b)	
V17C	Treatment given to treat relapse disease (Specific secondline chemotherapy combination c)	
V18	If blood transfusion given	1= Yes, 2= No - 3= Unknown
V19	Status of patient at the end(alive, dead)	1= Alive, 2= Dead
V20	If the patient is dead, date of death	
V21A	If the patient is dead, cause of death a	
V21B	If the patient is dead, cause of death b	
V21C	If the patient is dead, cause of death c	
V21D	If the patient is dead, cause of death d	
V22	Date the patient was last reviewed in clinic at UCI	

Overview		
SUBJECT	Unique subject ID assigned to participants with samples submitted to Jaap from Uganda in the table since called "Overview"	
INITIALS	Initials derived from Family name and given name	
SERUM_ID	Identification number for serum submitted in overview	
BLOOD_CELLS_ID	Identification number for blood submitted in overview	
SALIVA_ID	Identification number for saliva submitted in overview	
TISSUE_SLIDE_NO	Identification number for tissue slides from tissue blocks submitted in overview	
TISSUE_BLOCK_NO	Identification number for paraffin tissue blocks submitted, most slides submitted in overview where cut from these blocks	
TISSUE_FROZEN_NO	Identification number for fresh frozen tissue samples submitted to Japp in overview	
ELISA serology Burkitt Lymphoma		
SALIVA		
SERA1	BL ELISA Serology1	
SERA2	BL ELISA Serology2	
SERA3	BL ELISA Serology3	
Tissue conclusion table	Table in database : BL TISSUE CONCLUSION	
TISSUE_SLIDE_NO	Serial NUMBER(Lab # from Netherlands)	
TISSUE_BLOCK_NO	Tissue Parafin block #	
TISSUE_FROZEN_NO	Frozen tissue #	
BL_STATUS	Definitive Lab diagnosis from Netherlands	1, 2, 3, 4, 5; Please see the following comments from Professor Jaap:
		The numbering ws used for my own selection of clear BL, non-BL, and other case classifications:
		The classifications were as follows:
		"0": Clearly EBV negative tissue (irrespective of tissue type): Both EBER negative and morphology = non-Burkitt.

		Based on interpretation of both EBER-stained tissue section cut from tissue block at VUmc and inspection of
		original diagnostic slide from Uganda of same case.
		"1": Clearly EBV+ Burkitt : definitive classification based on EBER+ , bcl2-/CD10+ staining and tumor morphology
		in both EBER-stained tissue from fresh cut material at VUmc and/or Uganda original diagnostic slide
		"2": Not used yet, but number reserved for clear EBV- lymphoma (e.g. Diffuse Large B-cell Lymphoma).
		"3": Possible EBV+ BL tissue or other lymphoma, but yet classified. Uganda tissue slide sometimes discrepant.
		Frequently EBER+, but obscure morphology. Need more markers for analysis, sometimes poor quality
		"4": Not used yet.. reserved for cases later classified as "other" tumors or "reactive tissue"
		"5": Mostly Uganda tissue slides present but no tissue blocks available at VUmc for EBER analysis,
		or non-interpretable VUmc tissues with absent Uganda slides, or discordant numbers.
EBER_RESULT	EBER result	NA=tissue block not available, pos= Positive lymphoma, neg= no lymphoma
EBER_COMMENT	Comment on EBER result	
HE_RESULT_NEDERLAND	Histology result from Netherlands	
HE_COMMENT	Comment on histology result	
OTHER_COMMENT	Other comments	
CD10_BCL2	CD10/BCL2 result	

Final BL EBV-DNA in Saliva BuffyCoat	Table name in database: OREM_BL_SALIVA	
SALIVA_ID		
SALIVA	Saliva EBV DNA load/ml	
BUFFYCOAT	Buffy coat EBV DNA load/ml	
BUFFY_COAT_NR	Buffy coat number	
BETA_GLOBULIN	Beta-Globulin raw PCR	
CELL_NO_TUBE	Host cell DNA load in tube #cell equivalent	
EBV_DNA_PER_CELL	EBV DNA PER CELL	
NUMBER_CELL_PER_ML_BLOOD	Number of cell/1ml blood	
EBV_PER_ML	Number of EBV/ml	
WHITE_BLOOD_CELLS	EBV DNA load per 10 ⁵ white blood cells	
Immunoblot	OREM_BL_IMMUNOBLOT	
BLOOD_CELLS_ID	Identification number for blood submitted in overview	
IMMUNOBLOT	Immunoblot	
Blood cells	OREM_BL_BLOOD_CELLS	
BLOOD_CELLS_ID	Identification number for blood submitted in overview	
BLOOD_CELLS	The number of cells in blood sample	
BL serology CMV-final	OREM_BL_CMV_IGG_CONCLUSION	
SUBJECT	Patient's id	
ELISA_SEROLOGY	Serology value	
Patient's variables		
SUBJECT	Unique number, patient id	
INITIALS	Initials derived from Family name and given name	
Q_ID_1_2	Q-id for questionnaire 1, 2	
Q_ID_3	Q-id for questionnaire 3	
BLOOD_CELLS_ID	Identification number for blood submitted in overview	
BLOOD_CELLS	The number of cells in blood sample	
IMMUNOBLOT	Immunoblot	
SERUM_ID	Serum id	

SERA1	BL ELISA Serology1 (from file BL ELISA final.xls)	
SERA2	BL ELISA Serology2 (from file BL ELISA final.xls)	
SERA3	BL ELISA Serology3 (from file BL ELISA final.xls)	
ELISA_SEROLOGY	Elisa Serology (from BL serology CMV-IgG final + names.xls)	
SALIVA_FLAG	Indicates if the participant has had sample in kind of Saliva or not	1: Participant has sample in kind of 'Saliva' 0:Participant has not 'Saliva'
SALIVA_ID	Saliva id	
SALIVA	Saliva	
BUFFYCOAT	Buffy coat EBV DNA load/ml	
BUFFY_COAT_NR	Buffy coat number	
BETA_GLOBULIN	Beta-Globulin raw PCR	
CELL_NO_TUBE	Host cell DNA load in tube #cell equivalent	
EBV_DNA_PER_CELL	EBV DNA PER CELL	
NUMBER_CELL_PER_ML_BLOOD	Number of cell/1ml blood	
EBV_PER_ML	Number of EBV/ml	
WHITE_BLOOD_CELLS	EBV DNA load per 10 ⁵ white blood cells	
TISSUE_CONCLUSION_FLAG	If participant has Tissue sample	
TISSUE_SLIDE_NO	Tissue slide no	Please see table Tissue conclusion (above)!
TISSUE_BLOCK_NO	Tissue block no	Please see table Tissue conclusion (above)!
TISSUE_FROZEN_NO	Tissue frozen no	Please see table Tissue conclusion (above)!
BL_STATUS	Definitive Lab diagnosis from Netherlands	Please see table Tissue conclusion (above)!
EBER_RESULT	EBER result	NA=tissue block not available, pos= Positive lymphoma, neg= no lymphoma
EBER_COMMENT	Comment on EBER result	
HE_RESULT	Histology result from Netherlands	
HE_COMMENT	Comment on histology result	
OTHER_COMMENT	Other comments	
CD10_BCL2	CD10/BCL2 result	
DIAGNOSIS	Diagnosis	A=Case, B= Tumor control, C=Non Tumor Control D= No diagnosis
AGE	Age	

SEX	sex	1. Male 2. Female
FEVER	Fever as a general symptom	1=Yes 2=No
DUR_1	Duration of fever in weeks	
SWEATS	Night sweats as a general symptom	1=Yes 2=No
DUR_2	Duration of night sweats in weeks	
WTLOSS	Weight loss as a general symptom	1=Yes 2=No
DUR_3	Duration weight sweats in weeks	
HALITO	Halitosis as a general symptom	1=Yes 2=No
GSWELLING	Gland swellings as a general symptom	1=Yes 2=No
V1	Stage of disease for follow-up data	1=A, 2= B, 3= C 4= D 5= AR
V10	Date initial cycle of chemotherapy was given	
V19	Status of patient at the end(alive, dead)	1= Alive, 2= Dead
STAGE_OTHER_CANCER	Stage for other cancer	1, 2, 3, 4, 5
FOLLOW_UP	Participants with follow-up information (Q-3).	1= Follow-up available; 0=No follow-up
LAB_ANALYSIS	Participants with results from samples sent to lab in Netherlands Overview	1= Sent to lab; 0= Not sent to Lab
HIV_STATUS	Status of HIV	1= HIV Positive 2= HIV negative 4= Unknown
HE_RESULT_UGANDA	Comment on histology result from Uganda	Burkitt/Lymphoma Unspecified/Other tumor/Non tumor/Mucosal associated lymphomid tumor/Hodgkin's disease/Not applicable
CASE_CONTROL_NEDERLAND	status for Cases and controls from results of samples in Nederland	Key 1= Case, 2= Tumor Control, 3= Non tumor Control, 4= Unclassified or missed
CASE_CONTROL_UGANDA	status for Cases and controls from results of samples in Uganda	Key 1= Case, 2= Tumor Control, 3= Non tumor Control, 4= Unclassified or missed
BL_CASE_CONTROL_NEDERLAND	status for Burkitt Cases and controls from results of samples in Nederland	1= BL, 2= Other Lymphomas , 3= Other tumors and Non tumor conditions, 4= Missing
BL_CASE_CONTROL_Uganda	status for Burkitt Cases and controls from results of samples in Uganda	1= BL 2= Other Lymphomas 3= Other tumors and Conditions 4= Missing






















