

Table SI. Clinical and histopathological features of lupus erythematosus tumidus compared to marginal zone lymphoma

Criteria	Lupus erythematosus tumidus	Marginal zone lymphoma
Clinical	Erythematous, succulent, urticaria-like non-scarring plaques in sun-exposed areas, trunk.	Multifocal plaques or nodules most commonly on trunk and arms, face.
Patients	Young adults aged 30–40 years, male or female.	Patients aged 35–60 years, female or male.
Histology	Perivascular and periadnexal lymphocytic infiltration, mucin deposition, sparing of the epidermis.	Patchy, nodular, or diffuse infiltrates composed of small lymphocytes, marginal zone cells, lymphoplasmacytoid cells, plasma cells, reactive T cells, frequently germinal centres. Monotypic plasma cells (light chain restriction) or positive B-cell clonality.
Treatment	Systemic anti-malarial therapy, alternatively thalidomide.	Solitary tumour: topical or intralesional corticosteroids, radiotherapy or excision. Multifocal lesions: watch and wait, rituximab.