<u>Abstract</u>

Sarcoidosis is a granulomatous multi-organ disorder characterized by noncaseating granulomas. It shares several differential diagnoses with tuberculosis (TB) and lymphomas. We present a case involving a 49-year-old Sri Lankan male exhibiting a complex clinical picture, including a progressively worsening dry cough, unexplained weight loss, inguinal and cervical lymph node enlargement, splenomegaly, and peripheral neuropathy. It is imperative to conduct a comprehensive diagnostic evaluation to delineate the underlying cause of these diverse and interconnected symptoms, with a primary focus on distinguishing between lymphoma, TB, and sarcoidosis. Importantly, the coexistence of these conditions is possible.

In conclusion, both lymphoma and sarcoidosis can present with overlapping features, including constitutional symptoms, generalized lymphadenopathy, and hepatic-splenic involvement. Distinguishing between these entities can pose significant challenges, and while co-occurrence is relatively rare, it remains a possibility. Therefore, when confronted with lymphadenopathy, considering sarcoidosis as a potential diagnosis is essential. Vigilance is crucial in exploring alternative etiologies, encompassing infectious pathologies and lymphoproliferative disorders, as part of a comprehensive diagnostic strategy.