Massive Skin Infiltration in Multiple Myeloma

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Clinical Image

A 71 years old Mexican female was admitted to emergency room with heavy left leg pain, fractures in the right shoulder, six left costal rib, right acetabula space as well. X-ray showed bone lytic lesions. Physical examination revealed; violet nodular skin lesions in both thighs and thoracic anterior wall (Figure 1). Laboratory was normal but it was found polyclonal plasma cell increase in the bone marrow. No “M” component in blood or urine. Skin Biopsy was diagnosed as Multiple Myeloma (Figure 2) positive to CD38 and CD138 with lambda chains as well in immunohistochemically special stain (Figure 3).

Patient received treatment with thalidomide plus Dexamethasone with zoledronic acid with minimal response to the skin infiltration; therefore we started chemotherapy with VAD protocol

Figure 1: Skin lesions.

Figure 2: Skin Biopsy.

Figure 3: Immunohistochemically stain.
(Vincristine, Adriamycin and Dexamethasone) with partial response. Skin Radiotherapy in both legs was indicated and it was obtained 80% of response, but shortly relapsed and passed away after one year of the diagnosis.

This patient represents a single very rare case of Multiple Myeloma with massive skin infiltration that it is extremely strange location of presentation and might represent a very bad prognosis disease.