

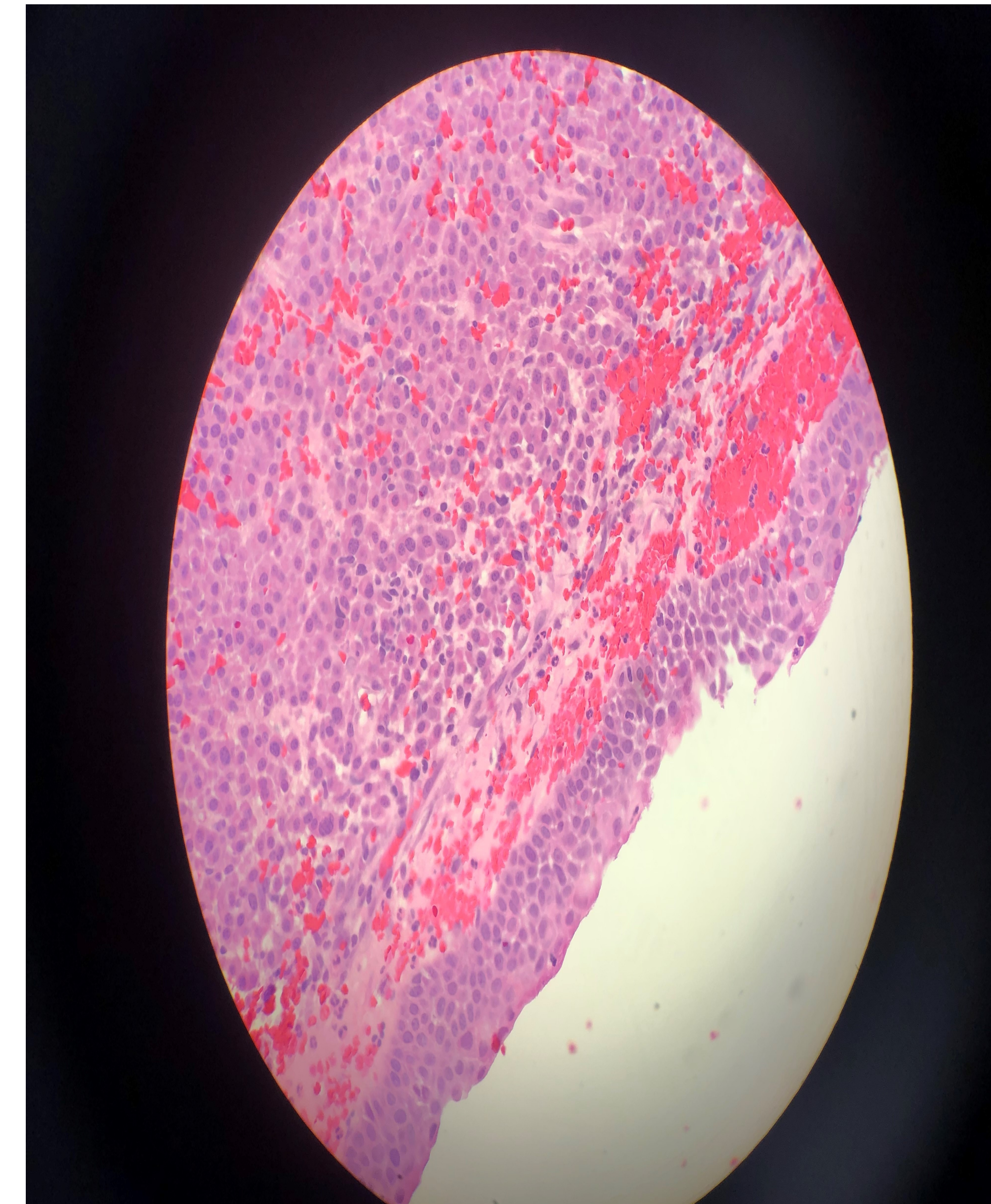
Background

Plasmacytomas are lymphoproliferative disorders characterized by monoclonal proliferation of plasma cells. Solitary bone plasmacytoma and extramedullary plasmacytoma are two subtypes of plasmacytomas. Only less than 10% of all plasmacytic tumors and less than 1% of head and neck tumors are accounted for by extramedullary plasmacytomas. They most commonly occur in the submucosa of the upper respiratory tract. The risk of conversion to multiple myeloma is unclear but is certainly less than that with solitary bone plasmacytoma. Extramedullary plasmacytoma of the nasal cavity can present with nasal obstruction, epistaxis, rhinorrhea, facial swelling, and pain.

Case Report

We present a case of solitary extramedullary plasmacytoma of the left inferior turbinate in a 54-year-old female who presented with progressive left nasal obstruction and difficulty breathing. Nasal endoscopy showed a large polyp growing from the left inferior turbinate causing 100% obstruction. Excisional biopsy was consistent with plasmacytoma. Whole-body PET/CT showed no evidence of disease and no bony destruction or abnormal uptake in the nasopharynx and nasal cavity. Serum electrophoresis, urine electrophoresis, bone marrow aspirate biopsy, and other screening tests showed no evidence of multiple myeloma. Diagnosis of solitary extramedullary plasmacytoma of the nasal cavity was confirmed. The patient was then treated with adjuvant radiation therapy to the left inferior turbinate for a total dose of 45 Gy, given in 25 fractions.

Image



H&E section of the nasal polyp showing fragments of mucosa undermined by sheets of plasmacytic cells.

Conclusion

Extramedullary plasmacytoma of the nasal cavity is a rare, slow-growing tumor that can present as a nasal polyp causing nasal obstruction. Diagnosis can be missed if these nasal polyps are not biopsied. Radiotherapy is the treatment of choice. Complete surgical resection is also suggested based on the size and resectability. The role of chemotherapy is unclear. The optimal follow-up protocol for extramedullary plasmacytoma of the nasal cavity is unclear due to the rarity of this tumor and the lack of randomized clinical trials.

References

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