SOHO ANNUAL MEETING 2024

Unusual Extramedullary Relapse in the Colon and Subcutaneous Tissue of a Patient with Multiple Myeloma

Authors: M. Zafar MD[1,2], A. Reddy MD[1], S. Kumar MD[3]

1. Mercy Hospital Fort Smith, Fort Smith, USA.
2. Arkansas College of Osteopathic Medicine Mercy Program, Fort Smith, USA.
3. University of Connecticut Health, Farmington, USA.

Introduction

- Multiple myeloma (MM) constitutes about 1% of all malignancies and is the second most common hematological malignancy. MM is characterized by aberrant clonal plasma cell growth and infiltration of bone marrow and/or other tissues.

Aim

- We report a patient with MM in remission who had unusual site extramedullary involvement in the colon and subcutaneous tissue.

Case Description

- A 58-year-old female with a history of ESRD on dialysis as a complication of IgG kappa MM diagnosis from 2021 who completed myeloma therapy, including maintenance treatment, in September 2022.
- In December 2023, she presented to the oncology clinic with elevated M protein (0.7) and uptrending serum kappa light chain and IgG level.

Case Description

- Bone marrow biopsy revealed normocellular marrow for age, and PET scan showed no evidence of bone disease.
- A **subcutaneous left thigh nodule** was noted without significant FDG uptake.
- In February 2024, she was hospitalized for melena, and a colonoscopy revealed a large, round obstructing mass in the proximal ascending colon. Right hemicolectomy and surgical resection of the adjacent omental mass **showed plasma cell myeloma in the cecum, ileocecal valve, and an omental mass** with negative margins and no lymph node involvement.
- A repeat PET scan showed **a more prominent left subcutaneous thigh** mass and a **less prominent right thigh mass**. CT-guided biopsy of the left thigh mass confirmed plasma cell neoplasm.
- Bone marrow aspirate and biopsy again showed a normocellular marrow for age with no plasma cell involvement. She received VDT-PACE chemotherapy and completed stem cell collection followed by melphalan induction and autologous stem cell rescue (ASTR).

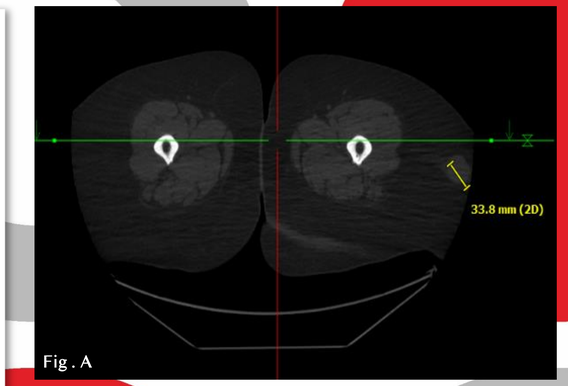


Fig A, B, PET scan revealing a more prominent left subcutaneous thigh mass 33.8 mm and a less prominent right thigh mass 26.1 mm.

Discussion

- Extramedullary plasmacytomas are uncommon, accounting for approximately 4% of all plasma cell tumors. Colonic involvement is rare, and treatment options include resection, radiation, systemic chemotherapy, and ASTR.
- Although skin nodules have been reported with MM, subcutaneous nodules are exceedingly rare. In case studies, patients with MM involvement in the gastrointestinal system and skin have a poor prognosis.
- Our patient interestingly had disease relapse only at uncommon extramedullary sites. Our case underscores the **need for early detection and timely management of extramedullary MM**, as well as the need for more **research to determine genomic factors influencing extramedullary presentation.**

References

1. Kakati BR, Krishna K, Krishna SG, Sharma SG, Sanathkumar N, Rego RF. Extensive extramedullary disease involving the colon in multiple myeloma: A case report and Review of literature. Journal of Gastrointestinal Cancer [Internet]. 2010 Aug 12;43(2):379–81. Available from: https://doi.org/10.1007/s12029-010-9199-z
2. Da Cunha AD, Silveira MN, Takahashi MES, De Souza EM, Mosci C, Ramos CD, et al. Adipose tissue radiodensity: A new prognostic biomarker in people with multiple myeloma. Nutrition [Internet]. 2021 Jun 1;86:111141. Available from: https://doi.org/10.1016/j.nut.2021.111141

Contact Information

mahazafar3@gmail.com
maha.zafar@mercy.net
Mercy Hospital Fort Smith