CASE REPORT LIVER INVOLVEMENT BY MULTIPLE MYELOMA

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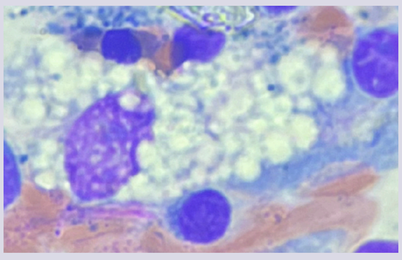
INTRODUCTION:

Extramedullary disease in multiple myeloma is characterized by the infiltration of monoclonal plasma cells into soft tissues, with hepatic involvement being a rare manifestation. Only a few isolated cases have been documented in the literature, which may present with elevated transaminases or abnormalities in the blood count.[1,2]

CLINICAL CASE:

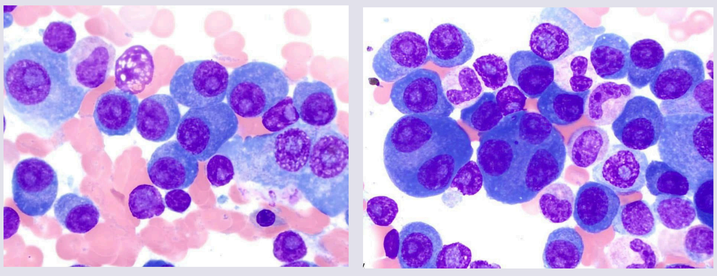
A 51-year-old male patient with a diagnosis of IgA Kappa multiple myeloma, ISS stage II, received first-line treatment with KCd and second-line therapy with DaraVrd. The patient was hospitalized due to the onset of hematochezia, with laboratory findings showing prolonged coagulation times and deficiencies in factors II, V, and X.

Given this clinical scenario, a positron emission tomography-computed tomography (PET-CT) scan was performed,revealing hepatic lesions with increased metabolic activity, showing a SUVmax of 7.2

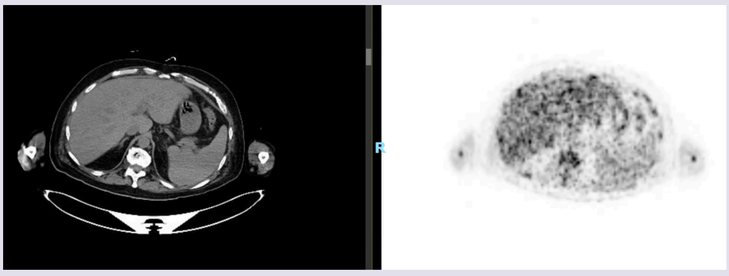


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A subsequent liver biopsy confirmed plasma cell infiltration, consistent with hepatic involvement secondary to multiple myeloma.



BONE MARROW
MULTIPLE MYELOMA



PET CT
LIVER INVOLMENT

CONCLUSIONS:

Extramedullary manifestation of multiple myeloma is an uncommon and often underdiagnosed condition. It is estimated that up to 30% of cases are detected incidentally during post-mortem examinations. Diagnosis poses a clinical challenge, largely relying on a high index of suspicion. Imaging techniques, particularly PET-CT, have proven to be valuable tools for detection. In the presence of hepatic abnormalities in patients with multiple myeloma, it is essential to consider the possibility of extramedullary infiltration.[3]

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