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Cutaneous manifestation of multiple myeloma

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Cutaneous manifestation of multiple myeloma A 53-year-old woman with refractory anaplastic multiple myeloma and a history of a recent cat scratch presented with five days of mildly painful purple nodules and plaques on her left flank. She was hospitalized awaiting autologous stem cell transplant with melphalan conditioning and dermatology was consulted to rule out herpes zoster infection. Upon examination she had multiple well-circumscribed, firm, smooth, plum-colored dermal nodules and plaques along her left flank, right lower abdomen, and right upper back. Differential diagnosis included cutaneous manifestation of multiple myeloma, leukemia cutis, acute febrile neutrophilic dermatosis (Sweet Syndrome), Kaposi sarcoma, and less likely bacillary angiomatosis. Punch biopsy revealed solid nests and sheets of atypical plasma cells with markedly increased proliferation index and restricted lambda relative to kappa, consistent with multiple myeloma. Multiple myeloma is an uncommon malignancy and extramedullary lesions are rare, occurring predominantly through direct bony extension and hematogenous spread. Cutaneous lesions account for only 1% to 4% of extramedullary disease and are a hallmark of poor prognosis and high disease burden, with a reported median overall survival of only 8.5 months after diagnosis. Our patient's recent history of a lytic lesion within her left eighth rib suggests bony extension as the most likely etiology of her cutaneous lesions. She successfully underwent stem cell transplantation with plans to begin maintenance therapy with carfilzomib 100 days post-transplant.

References:

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