Solitary Plasmacytoma Is A Rare Case Mimicking Multiple Myeloma

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INTRODUCTION:

Solitary plasmacytoma(SP) is an extremely rare with an incidence of 0.15/100.000(1).SP is a form of plasma cell neoplasm that presents as a single mass of monoclonal plasma cells.SP may progress to multiple myeloma(65-84% in 10 years)(2). The exact etiology is unknown but high radiation/chemical exposure,viral infection and hereditary can trigger it.We report an unusual case of SP with presentation of unilateral ankle swelling and massive pleural effusion.

REPORT:

A 49 years old Chinese male ,chronic smoker was presented to emergency department with complaints of shortness of breath and cough for 1 week duration and constitutional symptoms for 4 months.He also complained of left ankle pain and swelling over 4 months.

A physical examination showed generally patient is mild pallor and cachexia.Left lower limb examination was mild swelling over left ankle and limited range of motion.
Hematological finding showed normochromic normocytic anemia with rouleaux formation, acute renal impairment but normal serum calcium.Serum protein electrophoresis identified a IgG Kappa paraproteinemia (49.2 g/l), and a large amount of free kappa light chains(9 g/l) suggestives multiple myeloma(MM).Tumour markers parameter were normal except for CA 125(47.6 U/ml).

Computated tomography of thorax,abdomen and pelvis with contrast showed bilateral pleural thickening with massive left lung pleural effusion.Radiography of left ankle revealed mildly enhancing circumferential soft tissue mass surrounding left tibia (predominantly epiphysis and metaphysis) with lytic and sclerotic changes(Figure 1 and 2).

Figure 1

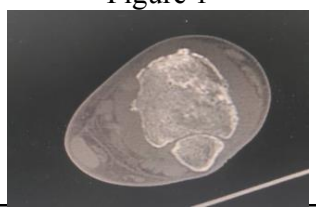
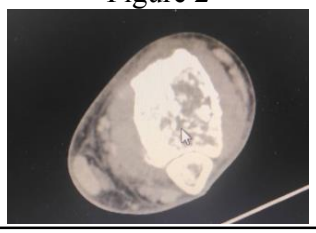


Figure 2



The histopathology of the bone and tissue biopsy were consistent with a diagnosis of plasmacytoma.

CONCLUSION:

Here, we are enlightening this rare presentation of plasma cell malignancy and it is a biopsy-proven tumor.Presentation of solitary plasmacytoma can be mimicking presentation of multiple myeloma.Therefore,clinical presentation, hematology investigation ,radiography and histopathological evaluation are required to achieve a correct diagnosis.

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