

## **P1. PRIMARY PLASMA CELL LEUKEMIA- CASE PRESENTATION.**

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**Introduction:** Primary plasma cell leukemia is one of the rarest form of the plasma cell malignant diseases. The prognostic of this disease is extremely poor with a medium survival by only several months. It is defined by the presence of over 20% plasma cells in peripheral blood. In most cases it is primary, but it could be secondary, in the multiple myeloma evolution.

**Case presentation:** An old woman, 76 years old, was presented in our clinic, complaining of nausea, vomiting, dizziness, fever and weight loss. In May this year the patient was admitted in Nephrology Clinic for an episode of acute renal failure, where she was found with high leukocytes count, anemia and she was guided to our clinic. Laboratory analyses and marrow puncture was found 38% plasma cells, with over 20% plasma cells in peripheral blood, with plasma cell immunophenotyp features: CD20+, CD38+, CD19-, CD56-. Laboratory analyses were showed a high white blood count 53.000/mmc, an anemia 8,3g/dl, a thrombocytopenia 77.000/mmc and renal failure, creatinine 2,84mg%. No evidence of osteolytic bone lesions was showed at skeletal survey. We administered first cycle VAD, day 1-4, with decreased of white blood count at 8870/mmc and a better renal function, creatinine 1,21mg%. After chemotherapy the patient made an infectious complication, Clostridium Difficile acute enterocolitis, so we had to stop the chemotherapy.

**Conclusions:** Compared with multiple myeloma, plasma cell leukemia presents more often acute leukemia clinical features: anemia and thrombocytopenia appears more often and there are more aggressive. Osteolytic lesions are less expressed but hypercalcemia as well as impaired renal function are often presented.

**Keywords:** plasma cell, leukemia, prognostic