

P7. SUSTAINED REGRESSION OF THE DISEASE UNDER THERAPY WITH LEVOFLOXACIN IN TWO CASES OF MYELOYDYSPLASTIC SYNDROME.

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We are presenting two cases of patients with myelodysplastic syndrome- RAEB and trilinear damage on therapy with levofloxacin that had sustained regression of disease:

The first is the male patient CG, born in 1943 and diagnosed with myelodysplastic syndrome-AR in 2008, with favorable evolution until May 2012, when the disease progression appears. Haematological evaluation indicates pancytopenia and medulograma reveals a rate of 8% blasts. Patient accepted only supportive therapy until November 2012, when returns with worsening suffering by non tuberculous L4/L5 infection surgically solved and treated with levofloxacin. Marrow puncture performed on this occasion indicates the percentage of myeloblasts increased to 15% and cytogenetic analysis did not indicate significant changes; clinico-biological evolution is favorable and medulograma later in December 2012 indicate partial correction of cytopenias and the percentage of blasts decreased from 15% to 4%. The patient maintained levofloxacin therapy and evaluations of May and July 2013 indicate minimal changes of myelodysplastic nature and percentage of blasts of 6%.

The second case is the patient IM, female, born in 1948 and diagnosed in September 2012 with myelodysplastic syndrome associated with myxedema and severe autoimmune hemolytic anemia. The marrow puncture at diagnosis indicates myelodysplastic syndrome and the percentage of blasts is 5% . After correction of myxedema and controlling the hemolysis, the patient is revalued hematologically (in November 2012) and there is progression of disease with increasing percentage of blasts to 10%. The patient presents as chronic associated pathology pyelonephritis and for its recurrent exacerbation we initiated antibiotic therapy with levofloxacin. Evolution was favorable clinically and hematologically, so the hematologic evaluation in March 2013 indicated regression of disease with partial correction of cytopenias and the percentage of blasts in her bone marrow decreased from 10% to 4%;

Observations are arguments for the already stated role of quinolones, imposing their effectiveness in expanding research on serious diseases such as myelodysplastic syndrome.