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Molecular subtypes of PML/RARα in patients with acute promyelocytic leukemia.

Castro-Mujica Mdel C, Sullcahuamán-Allende Y.

Rev Peru Med Exp Salud Publica. 2013 Mar;30(1):37-40.

Abstract

The objective was to describe the frequency of molecular subtypes of PML/RARα in patients with acute promyelocytic leukemia (APL) and their distribution according to risk of recurrence and cytomorphology. A case series was carried out, including fifty patients registered at the National Institute of Neoplastic Diseases (INEN) during 2010-2012, with molecular diagnosis of APL PML/RARα and bcr1, bcr2 and bcr3 subtypes by reverse-transcription polymerase chain reaction (RT-PCR). Bcr1 subtype was the most frequent (62%). Most patients with an intermediate risk of recurrence and hypergranular morphology were bcr1 (70%), while all patients with high risk of recurrence and hypogranular morphology were bcr3. A predominance of bcr1 subtype among the population studied can therefore be concluded, as well as the fact that there are differences in the distribution of bcr1 and bcr3 subtypes according to recurrence risk group and cytomorphology.

Testicular plasmacytoma as presentation of multiple myeloma: case report and review of the literature.

Pow Sang M, Astigueta JC, Abad M, Sánchez J, León J.

Arch Esp Urol. 2013 Mar;66(2):242-8.

Abstract

OBJECTIVE: We present the case of a patient with testicular plasmacytoma as initial presentation of multiple myeloma, and we carry out a literature review of this uncommon pathology. METHODS: 63 year-old male who consulted for a testicular mass for three months. After clinical and diagnostic studies he underwent radical orchiectomy. RESULTS: Pathologic study of the specimen revealed the presence of round cells, some with plasmocytic aspect. Immunohistochemical studies gave the final diagnosis of plasmacytoma. Studies on disease extension showed rounded lytic lesions spread over the vault of the skull bones. Bone marrow studies, as well as bone biopsy showed infiltration by plasma cell neoplasia in more than 90%, consistent with the diagnosis of multiple myeloma. The patient received treatment, developing disease progression and subsequently died from the disease. CONCLUSIONS: Solitary plasmacytoma represents only 6% of all plasma cell neoplasms. Testicular presentation is an unusual event, representing 2% of cases. Although this is usually an autopsy finding, it may constitute the first manifestation of multiple myeloma or exceptionally be the unique location of a plasma cell neoplasm. To date there are few reports published in the literature. This case constitutes a contribution for the knowledge of testicular plasmacytoma.