

Multiple myeloma with leptomeningeal involvement and positive CSF

Arunabh Sekhri¹, Pallavi Khattar², Humayun Islam², Delong Liu¹

¹Department of Medicine, ²Department of Pathology, Westchester Medical Center, Valhalla, NY 10595, USA

Correspondence to: Delong Liu. Department of Medicine, Westchester Medical Center, Valhalla, NY 10595, USA. Email: Delong_liu@nymc.edu.

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A 50-year-old female with multiple myeloma was initially treated with lenalidomide/bortezomib/dexamethasone. She had progression of disease after three cycles. She was then treated with DB-PACE (dexamethasone, bortezomib, cisplatin, doxorubicin, cyclophosphamide, etoposide) ×3 cycles. This was followed by stem cell mobilization with GCSF and plerixafor. She presented with persistent headache, no photophobia, no nausea/vomiting, no motor weakness. She underwent MRI of the brain which revealed a new enhancing ovoid lesion within the right middle cranial fossa which measures 8 mm and may represent extra-axial pachy meningeal/leptomeningeal enhancement or cortical abnormal enhancement with extensive associated vasogenic edema in the right temporal lobe. Cerebral spinal

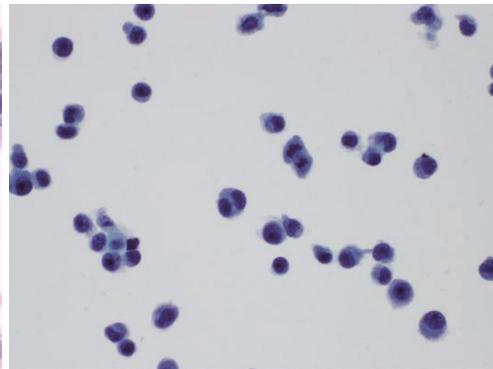
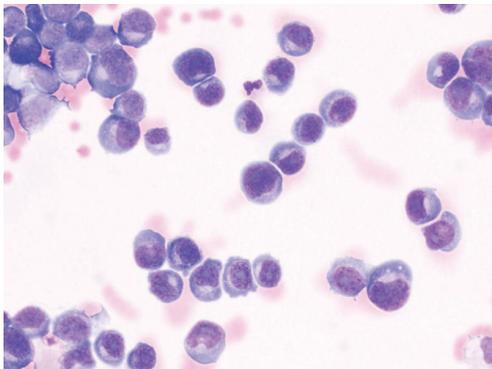
fluid (CSF) was obtained. CSF cytology showed abundant malignant plasma cells (left panel, H&E stain, 40×; right panel, Papanicolaou stain, 20×). CNS involvement by multiple myeloma is uncommon.

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Footnote

Conflicts of Interest: The authors have no conflicts of interest to declare.



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