

ASHC 2023

Title

WALDESTROM DISEASE: A SERIES OF 9 CASES

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Introduction

Waldenstrom's macroglobulinemia is a chronic lymphoproliferative syndrome characterized by bone marrow infiltration with lymphocytes, lymphoplasmocytes and plasma cells secreting monoclonal IgM. This is a rare hemopathy with a median age of discovery of 70 years, and we report our department's experience with this pathology.

Methodology

This is a retrospective descriptive and analytical study including 9 patients presenting with Waldenstrom's disease and followed up at the Internal Medicine and Onco-Hematology Department during the period between 2012 and 2023.

Results

In our series, 9 patients were collected, 5 men and 4 women with a sex ratio F/H of 0.6 , the mean age at diagnosis was 67 years {56-76 years } The revealing sign was hyperviscosity syndrome (n=4), hemorrhagic syndrome (n=2), and anemia syndrome in 3 cases.

All our patients suffered from a tumor syndrome with polyadenopathies, hepatomegaly and splenomegaly in 3 cases, and general signs.

On the laboratory tests: all 9 patients had normocytic normochromic anemia, with hemoglobin levels ranging from 3 to 8 g/dl, and an average IgM level of 38 g/l.

The erythrocyte sedimentation rate was accelerated in all our patients. The main autoimmune manifestations were myositis in one patient, peripheral neuropathy in two patients, and cold agglutinin disease in two patients. All our patients were systematically tested for cryoglobulinemia. Eye bleeding was observed in 3 patients, complicated in one patient by irreversible blindness. Two of our patients required plasmapheresis because of major hyperviscosity syndrome. The diagnosis of Waldenstrom's macroglobulinemia was confirmed by bone marrow biopsy in 6 patients and by bronchial biopsy in 3, with anatomopathological study in favor of a lymphoplasmacytic infiltrate with positive anti-CD20 and CD138 antibodies.

All our patients received courses of rituximab-based chemotherapy associated with cyclophosphamide and dexamethasone, and three patients required a 2nd line of therapy, the evolution of which was marked by a complete response in 6 patients and 2 patients are currently being evaluated and 1 patient was lost to follow-up.

Conclusion

Waldenstrom's disease is a rare monoclonal gammopathy, and according to our series, it is a rare disease with a good prognosis.

Recommendation

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Acknowledgements

The authors gratefully acknowledge the helpful discussions with anatomopathological professors at the university hospital of Fes.