The Orthopedist

ISSN: 2766-8304

Letter to the Editor

Isolated Polyarthritis, Paraneoplasic Origin, Reveling an Acute Myeloid Leukemia

Kawtar Nassar, Soumaya Ousehal and Saadia Janani*

Department of Rheumatology, IBN Rochd University Hospital Center, Morocco

Letter to the Editor

Paraneoplastic syndromes are a group of diseases related to a known or occult neoplasia with no direct anatomical relation to it, and disappear after treatment of the tumor, most often malignant [1]. Rheumatic and systemic paraneoplastic symptoms are quite rare and can be classified into articular, neuromuscular, cutaneous, vascular and various. The interval between the onset of rheumatic signs and the diagnosis of the associated tumor often does not exceed 2 years [2]. Isolated polyarthritis is the least common feature. We report a case discovering an acute myeloid leukemia.

Mrs. K.N. 58 years old, with no past medical history. She had a chronic arthritis pain of hands joints bilaterally and asymmetrically, without axial or extra-articular signs, evolving with deterioration of the general state. The patient was taking methotrexate at 12.5 mg/week since 6 months with oral corticosteroid therapy since the onset of symptoms progressive doses between 15 mg/day to 20 mg/day with poor response. The clinical examination had identified synovitis of the small joints of the hands, knees and ankles without deformities. The structural assessment had not objectified joint destruction. The rheumatoid factor was at 26/64 and the anti-CCP antibodies were negative as well as the anti-nuclear antibodies. There was an important biological inflammatory syndrome (sedimentation rate at 120 mm/1hr, C-reactive protein at 75.3 mg/l) with presence of bicytopenia: anemia at 8 g/dl aregenerative and neutropenia refractory to corticosteroids even when the methotrexate was stopped. The myelogram had shown 26% of blast cells in favor of acute myeloblastic leukemia. The patient had started the chemotherapy with a good response. The decline is 13 months.

The first pathogenesis mechanism suggested is the triggering of the inflammatory process in the target tissue following the secretion by tumor cells of autocrine and paracrine mediators (hormones, cytokines, enzymes). The other mechanism is linked to apoptosis of neoplastic cells which is responsible for cross immune reactions against antigens [3]. In the series of Morel et al., [4] 23% of malignant hemopathy were paraneoplastic rheumatologic syndrome [4]. In the largest cohort including 65 patients, the average age was 50.2 years and a male predominance was observed at 51% [5,6]. The possibility of a malignant disease developing under polyarthritis must often be kept in mind. Our patient paraneoplastic polyarthritis criterias are: age, general state deterioration, the time between the discovery of leukemia and polyarthritis, biological inflammatory syndrome, cortico resistance, seronegative immunological assessment and the absence of radiological destruction.

Keywords: Paraneoplastic syndrome; Isolated polyarthritis; Acute myeloid leukemia; Paraneoplastic rheumatic symptoms

References

1. Charles M, Saout V, Bouvard B, Audran M. Syndromes rhumatologiques paranéoplasiques. Revue du Rhumatisme. 2008;75:352-7.
2. Bojinca V, Janta I. Rheumatic manifestations as initial presentation of malignancy. Rheumatic Diseases and Malignancies. Maedicae. 2012;7(4):364-71.
3. Masson C, Bouvard B, Audran M. Paraneoplastic rheumatologic manifestations apart from hypertrophic osteoarthropathyParaneoplastic rheumatic syndromes (except hypertrophic osteoarthropathy). EMC-Rhumatologie Orthopédie. 2005;2(5):501-9.
4. Morel J, Deschamps V, Toussirot E, Pertuiset E, Sordet C, Kieffer P, et al. Characteristics and survival of 26 patients with paraneoplastic arthritis. Ann Rheum Dis. 2008:67(2),244-7.
5. Kisacik B, Onat AM, Kasifoglu T, Pehlivan Y, Pamuk ON, Dalkilic E, et al. Diagnostic dilemma of paraneoplastic arthritis: caseseries. Int J Rheum Dis. 2014;17:640-5.
6. Manger B, Schett G. Rheumatic paraneoplastic syndromes-a clinical link between malignancy and autoimmunity. Clin Immunol. 2018;186:67-70.

Citation: Nassar K, Ousehal S, Janani S. Isolated Polyarthritis, Paraneoplasic Origin, Reveling an Acute Myeloid Leukemia. Ortho. 2020;1(2):1008.

Publisher Name: Medtext Publications LLC

Manuscript compiled: May 11th, 2020

***Corresponding author:** Kawtar Nassar, Department of Rheumatology, Ibn Rochd University Hospital Center, Medicine and Pharmacy University of Casablanca, Casablanca, Morocco, Tel: 00212 662080302; E-mail: nassarkawtar@gmail.com