

SOLITARY PLASMACYTOMA: ANALYSIS OF THE CLINICAL AND THERAPEUTIC PARAMETERS OF A BRAZILIAN CENTER

Eric Pena¹, Matheus Feydit Silveira², Fabio Eudes Leal¹, Juliana Gravina Van Boekel³

1. Instituto Nacional de Câncer José Alencar Gomes da Silva

2. Aluno de graduação da Universidade Estácio de Sá

INTRODUCTION

Solitary plasmacytoma (SP) is a disorder characterized by clonal growth of plasma cells at a single site, and without clinical-laboratory changes defining multiple myeloma (MM) (1). The SP accounts for 5% of the plasma cells dyscrasias, (2) and the MM, the largest representative of this group of pathologies, represents more than 10% of all onco-hematological diseases, making it 1% of all neoplasms. (3) SP may present as a solitary bone plasmacytoma (SBP), with worst outcome, and extramedullary plasmacytoma (EMP). (4)

Thumallapally et al, after access to the US pathology database, were able to trace the profile of 1691 patients with SP. The median age is 63 years and 63% are males. Approximately 60% of SP were SBP and 30% were EMP, and the remaining 10% were not classified. (5) Katodritou et al observed similar indices in Greece. (1) Other characteristics analyzed were: the size of the tumor, which confers a worse prognosis; (1) the presence or absence of associated monoclonal protein, present in approximately half of the cases, most commonly in SBP, (6) and the site of the tumor, where the most common site in EMP cases were the upper airway tract. (1) In the most of the studies, the SP has an average survival rate above 60%. (4) Today the standard treatment is the use of radiotherapy with curative intent.

In Brazil there is little study on PS, without an estimate of the incidence and survival of this disease.

AIM

Through retrospective cohort, we analyzed incidence, clinical characteristics and outcome of patients with Solitary Plasmacytoma in INCA (National Cancer Institute) between 2000 to 2016.

RESULTS

It is expected to recruit 80 patients at our institution. At present, the research project is identifying patients submitted to informed consent for data analysis. (6)

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