

髓细胞肉瘤临床病理特征并文献复习

《现代肿瘤医学》[ISSN:1672-4992/CN:61-1415/R] 期数: 2019年24期 页码: 4448-4451 栏目: 论著 (造血器·淋巴系肿瘤) 出版日期: 2019-11-08

Title: Clinic-pathological characteristics of myeloid sarcoma and review of literature

作者: 舒汨汨¹; 董宝侠²; 杨岚²; 白庆咸²; 陈协群²

1.西北大学附属医院 西安市第三医院, 陕西 西安 710021; 2.空军军医大学西京医院血液科, 陕西 西安 710032

Author(s): Shu Mimi¹; Dong Baoxia²; Yang Lan²; Bai Qingxian²; Chen Xiequn²

1.The Affiliated Hospital of Northwest University,Xi'an No.3 Hospital, Shaanxi Xi'an 710021,China;2.Department of Hematology,Xijing Hospital,the Air Force Military University,Shaanxi Xi'an 710032,China.

关键词: 髓细胞肉瘤; 化疗; 去甲基化治疗; 自体造血干细胞移植

Keywords: myeloid sarcoma; chemotherapy; hypomethylating therapy; autologous stem cell transplantation

分类号: R733.3

DOI: 10.3969/j.issn.1672-4992.2019.24.030

文献标识码: A

摘要: 目的: 探讨髓细胞肉瘤 (myeloid sarcoma,MS) 的临床表型、病理特征及治疗反应。方法: 对西京医院2015年9月至2018年12月间收治的经组织病理学证实的7例MS的临床资料进行分析, 并复习相关文献。结果: 7例MS患者中位发病年龄40岁 (22-62岁)。1例诊断MS时合并骨髓增生异常综合征 (MDS), 其余6例骨髓形态学检查正常。7例MS病变分别累及皮肤、淋巴结、胰腺、胆管、乳腺、胸壁及眼眶。6例患者接受联合化疗、去甲基化治疗或自体造血干细胞移植 (ASCT)。中位生存期7个月。其中4例死亡患者中, 1例患者诊断后8个月进展至急性髓系白血病 (AML), 经多疗程联合化疗后, 生存期达31个月, 3例未进展至AML的孤立性MS生存期仅5个月左右。至随访结束时, 2例患者存活, 疾病仍处于完全缓解状态。1例患者发病时伴发MDS, 多疗程化疗方案含去甲基化药物; 另1例患者接受大剂量化疗联合ASCT治疗。结论: 进展至AML的MS, 其临床预后可能不劣于孤立性MS; 由去甲基化药物或ASCT组成的强化治疗方案似乎有益于改善MS的临床预后。

Abstract: Objective:To describe the clinical presentations,pathologic features and treatment response of myeloid sarcoma (MS).Methods:Seven MS patients pathologically diagnosed in Xi' jing Hospital from September 2015 to December 2018 were analysed.MS-associated literatures were reviewed.Results:Median age was 40 years (range:22-62).Bone marrow examination revealed a myelodysplastic condition in one patient and normal features in the other six patients.MS lesion involved skin,lymph nodes,pancreas,breast,bile duct,chest wall or orbital region.In the seven cases of MS patients,six patients received acute myeloid leukemia (AML)-like conventional or intensive treatments consisted of chemotherapy,hypomethylation,radiotherapy or autologous stem cell transplantation(ASCT).Median survival time from MS diagnosis was 7 months (range:5-31 months).Four of them died.A patient who presented isolated MS subsequently developed AML within 8 months from diagnosis,and obtained 31 months of survival after treated with polychemotherapy.By contrast,remaining three patients without evidence of AML on bone marrow examination only survived for about 5 months.Currently,two patients are still alive,for 17 months from diagnosis.One case with myelodysplastic condition received intensive treatments containing hypomethylating agent,and another was treated with high dose chemotherapy in combination with ASCT.Conclusion: Our data indicate that MS progressing to AML does not imply poorer prognosis compared with isolated MS,and intense treatments containing hypomethylating drug or ASCT appear to contribute to outcome of MS.

参考文献/REFERENCES

[1] Antic D, Elezovic I, Milic N, et al. Is there a "gold" standard treatment for patients with isolated myeloid sarcoma [J]? Biomed Pharmacother,2013,67(1):72-77.

[2] BAO F,WANG J,JING HM,et al.Clinical analysis of 10 cases with myeloid sarcoma [J]. Cancer Res Prev Treat,2017,44(6):409-412. [包芳, 王晶, 景红梅,等.10例髓细胞肉瘤的临床分析 [J]. 肿瘤防治研究,

2017,44 (6) : 409-412.]

[3] GUAN XY, DONG C, DONG L, et al. 2 primitive monocytic sarcomas cases in myeloid sarcoma and review of literature [J]. Journal of Practical Oncology, 2015, 30(6): 573-575. [关晓英, 董驰, 董莉, 等. 髓系肉瘤中的原始单核细胞肉瘤2例并文献复习 [J]. 实用肿瘤杂志, 2015, 30(6): 573-575.]

[4] Yilmaz AF, Saydam G, Sahin F, et al. Granulocytic sarcoma: A systematic review [J]. Am J Blood Res, 2013, 3(4): 265-270.

[5] Chang H, Brandwein J, Yi QL, et al. Extramedullary infiltrates of AML are associated with CD56 expression, 11q23 abnormalities and inferior clinical outcome [J]. Leuk Res, 2004, 28(10): 1007-1011.

[6] Montesinos P, Rayón C, Vellenga E, et al. Clinical significance of CD56 expression in patients with acute promyelocytic leukemia treated with all-trans retinoic acid and anthracycline-based regimens [J]. Blood, 2011, 117(6): 1799-1805.

[7] Seymour JF, Pierce SA, Kantarjian HM, et al. Investigation of karyotypic, morphologic and clinical features in patients with acute myeloid leukemia blast cells expressing the neural cell adhesion molecule (CD56) [J]. Leukemia, 1994, 8(5): 823-826.

[8] Xavier SG, Fagundes EM, Hassan R, et al. Granulocytic sarcoma of the small intestine with CBFbeta/MYH11 fusion gene: Report of an aleukaemic case and review of the literature [J]. Leuk Res, 2003, 27(11): 1063-1066.

[9] Campidelli C, Agostinelli C, Stitson R, et al. Myeloid sarcoma: Extramedullary manifestation of myeloid disorders [J]. Am J Clin Pathol, 2009, 132(3): 426-437.

[10] Chen SM, Silverman DA, Jatana KR, et al. Myeloid sarcoma presenting as bilateral acute otitis externa in newly diagnosed acute myeloid leukemia [J]. Int J Pediatr Otorhinolaryngol, 2019(122): 126-129.

[11] Palejwala AH, O'Conner KP, Shi H, et al. Chronic myeloid leukemia manifested as myeloid sarcoma: Review of literature and case report [J]. J Clin Neurosci, 2019(64): 269-276.

[12] Narayan P, Murthy V, Su M, et al. Primary myeloid sarcoma masquerading as an obstructing duodenal carcinoma [J]. Case Rep Hematol, 2012(2012): 490438.

[13] Borislav A Alexiev, Wenle Wang, Yi Ning, et al. Myeloid sarcomas: A histologic, immunohistochemical, and cytogenetic study [J]. Diagn Pathol, 2007, 2(42): 1-8.

[14] Zhang XH, Zhang R, Li Y. Granulocytic sarcoma of abdomen in acute myeloid leukemia patient with inv(16) and t(6;17) abnormal chromosome: Case report and review of literature [J]. Leuk Res, 2010, 34(7): 958-961.

[15] Bonig H, Gobel U, Nürnberger W. Bilateral exophthalmus due to retro-orbital chloromas in a boy with t(8;21)-positive acute myeloblastic acute leukemia [J]. Pediatr Hematol Oncol, 2002, 19(8): 597-600.

[16] Slomowitz SJ, Shami PJ. Management of extramedullary leukemia as a presentation of acute myeloid leukemia [J]. J Natl Compr Canc Netw, 2012, 10(9): 1165-1169.

[17] PANG YQ, WAN DM, CAO WJ, et al. Clinical analysis of 57 cases of granulocytic sarcoma [J]. Journal of Basic and Clinical Oncology, 2017, 30(1): 34-39. [庞雨晴, 万鼎铭, 曹伟杰, 等. 粒细胞肉瘤 57 例临床分析 [J]. 肿瘤基础与临床, 2017, 30(1): 34-39.]

备注/Memo: -

更新日期/Last Update: 1900-01-01