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Twenty Years Follow-Up in a Patient with Multiple Myeloma

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We would like to report an exceptional case of IgG Lamda MM with a long survival of nearly 20 years who did not receive chemotherapy and was treated only once by local irradiation.

In October 1961, a 56-year-old patient was diagnosed as suffering from multiple myeloma (MM). He presented with bronchopneumonia and pericarditis, most probably of viral origin. A very high blood sedimentation rate was found (93/124) and a paraprotein on serum electrophoresis. The bone marrow examination showed polymorphic material with presence of myeloma cells. Liver and kidney functions were normal. There was no Bence Jones protein and bone X-rays were normal. No treatment was given. For 7 years he continued working as a carpenter without complaints and no further examinations were done. In March 1968, a transvesical prostatectomy (adenomatoid hyperplasia) was done without complications. 6 years later he was admitted to the internal medicine department because of right ankle pains. His physical examination was normal. Protein electrophoresis and immunoelectrophoresis showed a paraprotein IgGAL. Quantitative immuno-diffusion showed IgG 3,600 mg/dl, IgA 59 mg/dl, IgM 29 mg/dl. On bone marrow examination numerous myeloma cells were present. Bence Jones protein was not found and kidney function was normal. X-ray of the right tibia bone showed osteolytic lesions in the lower part. No more osteolytic lesions were found. Local irradiation was done (600 rad) with improvement.

In February 1980, the patient was referred to the surgical department for inguinal hernioplasty. During this hospitalization, chest X-ray showed bilateral pleural effusion which contained the same paraprotein IgG λ as in the serum. On bone marrow examination a partial infiltrate by myeloma cells (25%) was found, but normal hemopoiesis was still preserved. Bence Jones protein was negative, kidney functions and Ca-P levels were normal. In regard to these findings we decided finally to start treatment with monthly administration of mel-phalan and prednisone. After three courses of this treatment the pleural effusion disappeared. The patient, now 75 years old, is still in good condition and is followed as an out-patient in our hematology unit.

Discussion

The case presented here is exceptional because of the long course of the disease without chemotherapy. Significant degrees

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of remission or improvement can be achieved in confirmed cases of MM with the present-day therapeutic regimen and the duration of remission varies from 6 months to 7 years, with median

survival of 3 years [1] but occasional cases of treated solitary myeloma have been reported with longer survival [2]. As concerns the untreated cases, Waldenström [3] in a retrospective study found patients who lived 5 years after the onset of the disease and recently Kyle and Greipp [4] resumed 6 cases of smoldering MM in whom the parameters remained satisfactory for several years (one of them up to 16 years) and no treatment was given. These observations and ours support the fact that low-grade evolving confirmed cases of MM may have a long survival without treatment. Such an attitude could possibly reduce the number of leukemias and other malignancies related to the chemotherapy in multiple myeloma.

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