

## Pulmonary Plasmacytoma

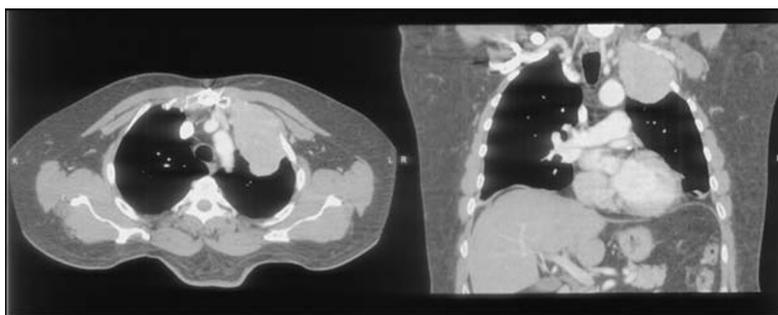
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A 64-year-old man presented with gradually worsening pain in his upper back for 1 year. Systemic examination was unrevealing. Computed tomography (CT) scan of chest (Fig. 1) showed a right-sided apical mass of 11 × 6 cm size and lesions on the second right rib and vertebrae T7-L1. CT-guided biopsy of the lung mass showed plasmacytoma. Serum protein electrophoresis revealed M-protein. Serum immunofixation showed elevated IgG lambda (3 gm/dl). Blood work showed normal complete blood count and kidney function. Calcium level was 10.7 mg/dl. Bone-marrow aspiration and biopsy revealed 52% plasma cells. Diagnosis of multiple myeloma with pulmonary plasmacytoma was made. The patient was treated with bortezomib and dexamethasone. After four cycles of chemotherapy, CT scan of chest (Fig. 2) showed complete resolution of the mass. On the basis of blood tests and bone-marrow studies, the patient is currently in stringent complete remission.

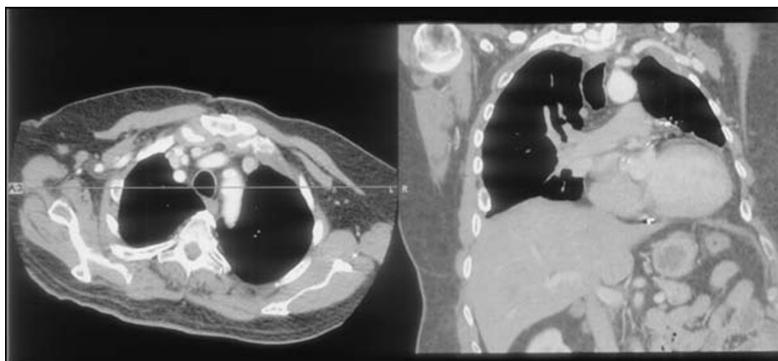
Although extramedullary plasmacytomas are found in 4% patients with multiple myeloma,<sup>1</sup> pulmonary plasmacytoma is rare.<sup>2</sup> Thalidomide is not effective in extramedullary plasmacytoma.<sup>3</sup> Similar to a previous case series,<sup>4</sup> our patient had excellent response to bortezomib.

### REFERENCES

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**FIGURE 1.** CT scan of chest showing large right-sided apical mass. CT, computed tomography.



**FIGURE 2.** CT scan of chest showing resolution of the lung mass. CT, computed tomography.

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