



Strange Case of Microangiopathic Hemolytic Anemia

Sousa OD*

General Hospital Dr. Caesar Cals, Brazil

Clinical Image

A 25-year-old woman sought medical help with a history of low back pain for approximately 45 days, with progressive worsening, affecting thoracic, lumbar and sacral regions, with irradiation to the abdomen, and partial improvement with analgesics. She underwent blood tests that demonstrated anemia, thrombocytopenia, elevated indirect bilirubin, lactate dehydrogenase, and elevated reticulocyte count. Abdomen and pelvic CT scan showed lymph node enlargement in celiac, adjacent to the splenic ileum, and left para-aortic; moderate amount of free fluid in the pelvis; multiple osteolytic lesions. Upper digestive endoscopy revealed thickening and gastric mucosal thickening. Bone marrow smears and trephine biopsy revealed no-hematologic cells clusters (Figure 1, 2), in signet ring pattern. Immunohistochemistry showed carcinoma (AE1/AE3 positive) and suggested primary involvement of the upper digestive tract. In conjunction with the morphological findings, it was consistent with infiltration of bone marrow by small differentiated diffuse pattern carcinoma with signet ring cells.

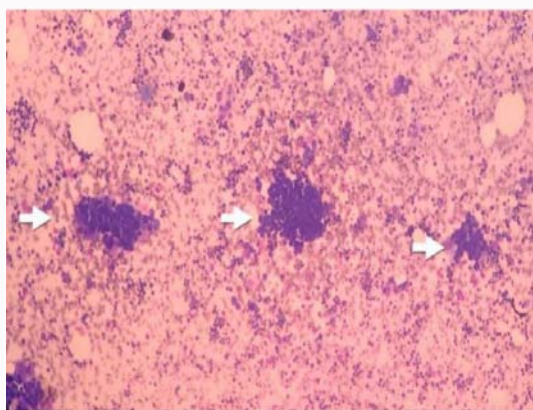


Figure 1: Cluster of non-hematologic cells in bone marrow smear.

OPEN ACCESS

*Correspondence:

Oliveira Deivide Sousa, General Hospital Dr. Caesar Cals, Brazil, E-mail: deividearmorial@gmail.com

Received Date: 17 Nov 2022

Accepted Date: 30 Nov 2022

Published Date: 05 Dec 2022

Citation:

Sousa OD. Strange Case of Microangiopathic Hemolytic Anemia. Clin Case Rep Int. 2022; 6: 1428.

Copyright © 2022 Sousa OD. This is an open access article distributed under the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

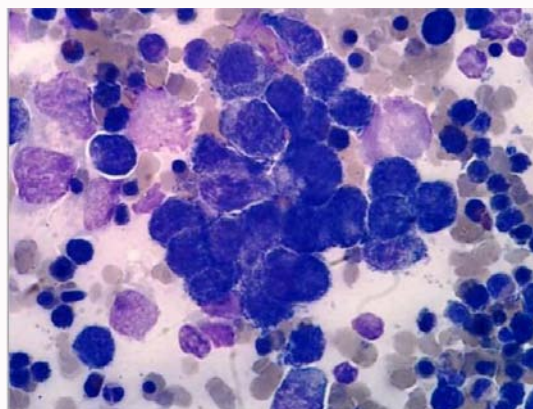


Figure 2: "Bunch of grapes" pattern in bone marrow smear.