

## Special Article- Multiple Myeloma

# Melanoma Metastasis Mimicking Plasmacytoma in a Patient with Multiple Myeloma

David Azoulay<sup>1\*</sup>, Vadim Sonkin<sup>2</sup>, Celia Surui<sup>1</sup>,  
Luiza Akria<sup>1</sup> and Andrei Braester<sup>1</sup>

<sup>1</sup>Hematology & Blood Transfusion Unit, Galilee Medical Center, Israel

<sup>2</sup>Department of Pathology, Galilee Medical Center, Israel

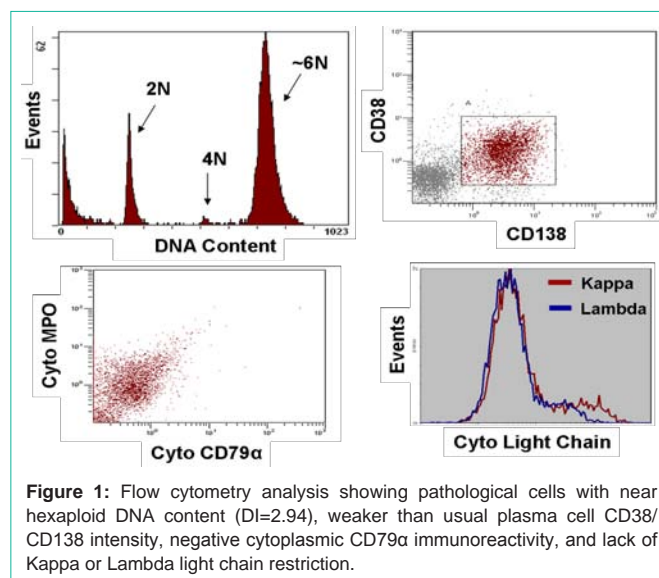
\*Corresponding author: David Azoulay, Laboratory for Clinical Cell Analysis & Translational Research, Hematology & Blood Transfusion Unit, Galilee Medical Center, P.O.B. 21, Nahariya 22100, Israel, email: David.Azoulay@naharia.health.gov.il

Received: November 28, 2014; Accepted: December 01, 2014; Published: December 03, 2014

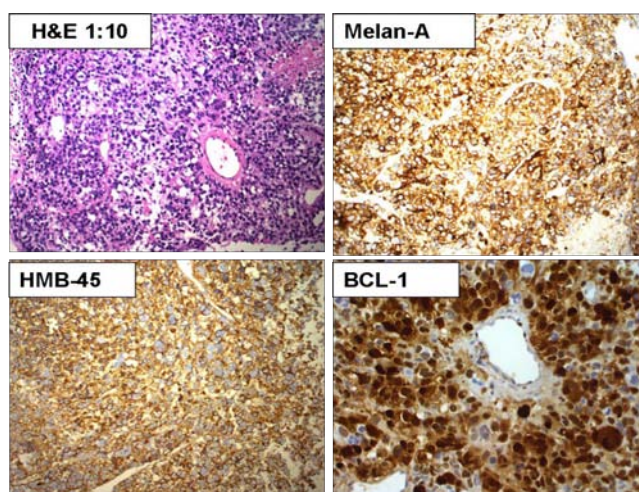
Analysis of a core biopsy from an inguinal lymph node of a 74-year-old male with multiple myeloma referred to our medical center due to the appearance of a new suspected Plasmacytoma in the right side of his penis. Flow cytometry analysis showing pathological cells with near hexaploid DNA content (DI=2.94), weaker than usual plasma cell CD38/CD138 intensity, negative cytoplasmic CD79 $\alpha$  immunoreactivity, and lack of Kappa or Lambda light chain restriction (Figure 1). Immunohistochemical analysis showing immunoreactivity for melan-A, HMB-45, and BCL-1, suggesting the diagnosis of melanoma metastasis (Figure 2). Syndecan-1 (CD138) is a well-known marker for plasma cells. However, its expression by other non-hematopoietic tumor cells [1] could be misleading. This unusual case, which shows the development of secondary melanoma in a patient with multiple myeloma, emphasizes the need to use multiple markers for the Immunophenotyping of plasma cells and being aware of non-hematopoietic cells mimicking plasma cells.

## References

1. Fionnuala P. O'Connell, Jack L Pinkus, Geraldine S Pinkus. CD138 (Syndecan-1), a Plasma Cell Marker-Immunohistochemical Profile in Hematopoietic and Nonhematopoietic Neoplasms. *Am J Clin Pathol* 2004; 121: 254-263.



**Figure 1:** Flow cytometry analysis showing pathological cells with near hexaploid DNA content (DI=2.94), weaker than usual plasma cell CD38/CD138 intensity, negative cytoplasmic CD79 $\alpha$  immunoreactivity, and lack of Kappa or Lambda light chain restriction.



**Figure 2:** Immunohistochemical analysis showing immunoreactivity for melan-A, HMB-45, and BCL-1.