## Rheumato-Geriatric Day

## Association of Scleroderma with Multiple Myeloma: A Rare Association

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## **ABSTRACT**

**Introduction:** Coexistence of scleroderma with multiple myeloma (MM) is an unusual association. Scleroderma is reported to be associated with solid tumors but association with multiple myeloma (MM) has rarely been reported. We report a case of a 70-year-old man who presented concomitantly with scleroderma and MM.

Observation: A 70-year-old man with antecedents of diabetes, hypertension and autoimmune hypothyroidism was admitted for diabetes control. He noticed asthenia, inflammatory arthralgia and a dry cough. On physical examination the patient had thickened tight skin all over the body with a sclerodactylia, a reduced mouth opening and a reduced ability of hand closure. Scleroderma was suspected. A restrictive pulmonary dysfunction was detected. A chest computed tomography showed a pulmonary fibrosis.

A diagnosis of scleroderma was made. According to Eular criteria 2013 the score was 12 (Skin thickening of the fingers extending proximal to the metacarpophalangeal joints and pulmonary fibrosis). Laboratory tests revealed a sedimentation rate at 145 mm, a creatinine rate at 133 µmol/l and a calcium level at 2.35 mmol/l. Serum protein electrophoresis showed a monoclonal gammapathy which on subsequent immunoelectrophoresis was identified as Ig G lambda. A bone marrow biopsy was performed and showed a plasma cell infiltration more than 50%. The diagnosis of a stage II A multiple myeloma was made. The patient was treated with Melphalan and Prednisone. The patient was dead one year after the diagnosis of the myeloma.

**Conclusion:** Scleroderma is a chronic autoimmune disease. The association of scleroderma with MM is rare. As this association may worsen the prognosis, it is suggested that all patients with scleroderma should be screened for monoclonal gammopathy.