2ND REGIONAL SYMPOSIUM ON MDS

CASE PRESENTATION

Dr. Galia Stemer

“Ha-EMEK” MC

March 2020

PATIENT A

- N. H. a 60 yo male, m+3
- Medical History:
  - HTN
  - Hypertriglyceridamia
  - Obesity – s/p gastric banding (2012) (lost 45kg)
  - Smoker
- Medications: folate 5mg

- Was reffered to the clinic in 06/2018 d/t symptomatic anemia and leukopenia:
  - Wbc: 3730 Neut: 2160 Lym: 930 Hb: 8.8 MCV: 106.3 Plt:211000
  - Chemistry: no abnormalities
  - B12: 347 FA:10 TSH: 3.13 B1:43 B6:12
  - * findings were notable since 2016 with mild deterioration

PATIENT A – cont.

- PE: normal
- FU: was treated 3 mon with tables of TRICARDIA (a complex of B1+B6+B12) – no improvement in blood values
- **DIAGNOSIS: MACROCYTIC ANEMIA**
- Underwent BM examination on 19/12/2018:
  - Biopsy: BM cellularity 60%, preserved topography, megaloblastic anemia (maturation arrest), no signs of dysplasia, blasts<1%. **Megaloblastic dismaturation of erythroid lineage**
  - Aspiration: mildly dysplastic RBC'S, no blasts
  - Genetics: normal karyotype, no molecular changes
  - Flow cytometry: no abnormal antigens

PATIENT A – cont.

- **IPSS-R score: LOW RISK (1.6)**
- **06/2019**: Started PC*1 – every 2 weeks + SC EPO (binocrit 20000units*1/week)
- **06-09/2019**: SC EPO – no improvement: PC*1/2 weeks
- **10/2019**: 54 genes – NGS: BCORL1 mutation (vus)

- **SUMMARY:**
  - 60yo male
  - Macrocytic/megaloblastic anemia
  - No improvement with medications (FA, VIT B1/6/12) or Epo tx
  - PC dependent

PATIENT A – cont.

- **QUESTIONS:**
  - Does the patient have MDS?
  - Hypomethylation tx?
  - Lospatercept?
  - Imetelstat?
  - Other?
  - Clinical research?