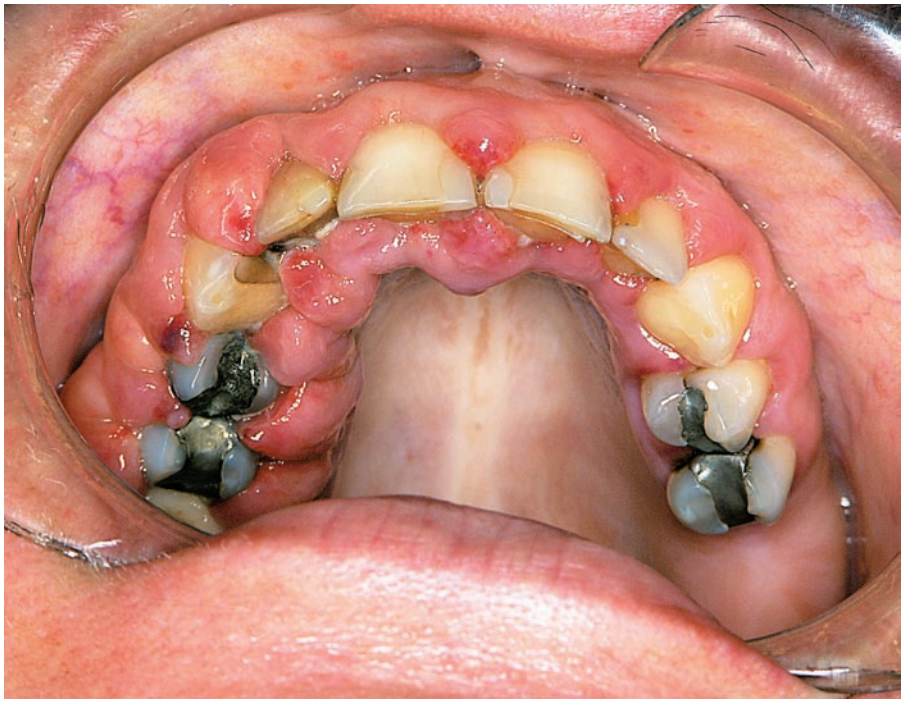
IMAGES IN CLINICAL MEDICINE

Gingival Hypertrophy and Leukemia



A 46-year-old woman who was not taking any medications presented with anemia and gingival hypertrophy that had been progressing over a period of 3 months. She was otherwise healthy. Histopathological evaluation of a gingival-biopsy specimen revealed a myeloblastoma. The white-cell count was 10,300 per cubic millimeter, the hematocrit was 26%, and the platelet count was 81,000 per cubic millimeter. Acute myeloid leukemia (AML) was suspected, and AML subtype M4 (according to the French–American–British classification) was finally confirmed by a repeated bone marrow biopsy 3 months later. She did not have a t(8;21) abnormality. A previous bone marrow biopsy had shown no excess of myeloblasts. Myeloblastoma is an extramedullary collection of immature myeloid cells that can occur in any tissue and that is often confused with an active infection. Myeloblastomas may precede the development of AML and are typically associated with its monocytic variants. This patient was treated with induction chemotherapy, which resulted in a complete histologic remission in the bone marrow after one course and in the gingiva after two courses. Because of the high risk of disease recurrence, the patient underwent allogeneic stem-cell transplantation, and she remains in remission 3 years later.

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