CHRONIC LYMPHOCYTIC LEUKEMIA IN AN ACROMEGALIC PATIENT

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INTRODUCTION

- Acromegaly patients are known to have an increased risk of malignancies. This may be as a result of the effect of insulin-like growth factor I (IGF-I) on cellular proliferation and apoptosis inhibition.
- Although there are various reports related with hematological malignancies in children who treated with growth hormone (GH), few data are available about hematological malignancies in acromegaly patients.
- Here, we report a patient with acromegaly who has been developed chronic lypmhocytic leukemia (CLL) in the follow-up period.

CASE

- A 30 years old woman who was at 25 th weeks gestation were consulted for gestational diabetes mellitus 9 years ago.
- Physical examination, random GH, IGF-I levels and glucose suppression test results were consistent with acromegaly.
- She reached full term without treatment, and had a caesarian section and delivered a 4200-gr-baby boy with Apgar score of 9.
- After 1 year delivery transsphenoidal surgery was performed and 3 months after the operation long-acting somatostatin analog treatment was begun.
- Since she had residual adenoma and biochemical remission was not achieved with medical treatment, she had underwent second operation after 1 year later the first surgery.
- Since the remission was not achieved despite the medical treatment, after 1 year later the second operation gamma-knife therapy has been performed.
- After 5 years later the radiotherapy, GH and IGF-I levels were decreased gradually, somatostatin therapy was lowered and finally discontinued.
- However, the patient had progressive leukocytosis with 90% lymphocytes.
- Flowcytometric analysis of the peripheral blood was consisted with CD5+, CD19+, CD20+, CD22+, CD79b+, CD43+, CD200+ lymphocytes with surface anti-kappa monoclonality.
- Fluorescent in situ hybridization analysis of bone marrow aspiration revealed 20% deletion 17p13.1(TP53).
- Her findings were consistent with CLL-stage II.

CONCLUSION

- Occurrence of CLL in the course of acromegaly may have been caused by excessive endogenous GH or may be a coincidental situation.