

# Thalidomide: near complete regression of extramedullary bulk in refractory multiple myeloma

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Multiple myeloma is a malignancy with a disappointing survival rate for patients treated by conventional chemotherapy. Despite intensive chemotherapy, local irradiation and high dose chemotherapy followed by autologous transplantation, this 47-year-old patient relapsed and developed a refractory tumour bulk at the cervico-thoracic junction. Painful compression of the spinal cord (Figure 1, a, b) with paraesthesia of the arm receded a few weeks after initiation of single drug therapy with thalidomide at 100-200

mg/day. Urinary light chain excretion gradually dropped from 1.1 g/day to <0.01 g/day within a four months' period. 1-year follow-up MRI reveals a significant regression of the medullary infiltration and the paravertebral extramedullary tumor masses (Figure 1, c, d). No neuropathy, constipation, fatigue, arrhythmia, skin rash, hypotension or neutropenia were noted. Whether antiangiogenic effects or e.g. modulation of autocrine cytokine loops lead to response in multiple myeloma is not entirely clear.

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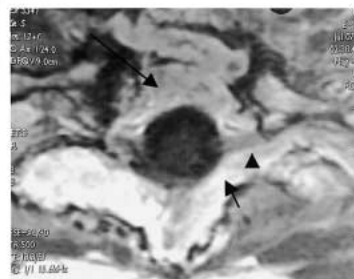
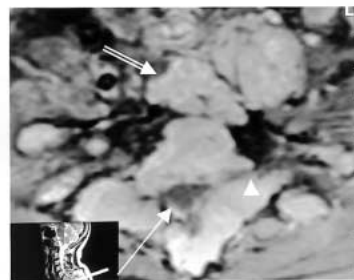
## Figure 1

a. Sagittal T2-weighted scan: medullary infiltration of segments C6–Th1 (⇒), pathological fracture of the vertebral body of C7 and Th1, secondary gibbus formation. Myelon compression by epidural component of the myeloma mass (Δ). Extramedullary tumor bulk (↗).

b. Axial scan: infiltration of Th1 vertebral body, circumferentially compressed myelon (↗), compressed of the left spinal nerve root (Δ). Praevertebral extramedullary tumor bulk (↘).

c. Regression of the epidural and praevertebral extramedullary tumor bulk, reexpansion of subarachnoid spaces (⇨).

d. Regression of Th1 vertebral infiltration (⇨). Improved delineation of the spinal nerve roots (▲) and the wide spinal canal.



## References

- 1 Singhal S, Mehta J, Desikan R, Ayers D, Roberson P, Eddlemon P, et al. Antitumor activity of thalidomide in refractory multiple myeloma. *N Engl J Med* 1999;341:1565–71.
- 2 Eisen T, Boshoff C, Mak I, Sapunar F, Vaughan MM, Pyle L, et al. Continuous low dose thalidomide: a phase II study in advanced melanoma, renal cell, ovarian and breast cancer. *Br J Cancer* 2000;82:812–7.
- 3 Tinhofer I, Marschitz I, Henn T, Egle A, Greil R. Expression of functional interleukin-15 receptor and autocrine production of interleukin-15 as mechanisms of tumor propagation in multiple myeloma. *Blood* 2000;95:610–8.
- 4 Baidas SM, Winer EP, Fleming GF, Harris L, Pluda JM, Crawford JG, et al. Phase II evaluation of thalidomide in patients with metastatic breast cancer. *J Clin Oncol* 2000;18:2710–7.

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