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DEVELOPMENT OF GIANT PLASMACYTOMA IN A PATIENT WITH BONE MARROW RESPONSE DURING TREATMENT: A CASE REPORT

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Objective: A plasmacytoma is a myelomatous mass that can develop into a widespread illness, be seen alone, or be combined with multiple myeloma (MM). Bone marrow does not always indicate MM, but over the course of 4-5 years, about 50% of cases advance to this disease. In this study, we aimed to present a patient who was diagnosed with multiple myeloma and developed giant plasmacytoma despite bone marrow response during follow-up.

Case report: During the 4th cycle, a giant plasmacytoma developed at the patient's right arm proximal humerus level. Ultrasound imaging performed on the right upper extremity was reported as 'Diffuse skin-subcutaneous thickness, increased echogenicity and linear fluid areas were observed. A large 5 × 3 cm hypoechoic nodular lesion with markedly increased blood flow was observed in the proximal medial neighborhood of the patient's incision line. Plasmacytoma continued to shrink with radiotherapy and chemotherapy. **Methodology:** At the time of diagnosis, EPs are seen in around 7% of individuals with MM and are best identified by PET/CT scans; the presence of EP is linked to a worse prognosis. Later in the course of the disease, 6% more patients will get EP. Large, crimson-colored, subcutaneous masses can be a symptom of EP. The creases on the palms and/or soles may be affected by plane xanthomas, which may be a paraneoplastic condition. Rarely, cutaneous spicules made partially of the monoclonal (M) protein may form. Results **Conclusion:** We presented a case that developed a giant plasmacytoma based on multiple myeloma. This case is important because, after the diagnosis, a giant plasmacytoma developed during the 4th cycle of chemotherapy, although the patient's laboratory examinations and clinic responded to chemotherapy after 3 cycles of chemotherapy.



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Adult Hematology Abstract Categories

Platelet Diseases

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A PHASE 3 STUDY TO EVALUATE THE EFFICACY AND SAFETY OF CAPLACIZUMAB WITHOUT FIRST-LINE THERAPEUTIC PLASMA EXCHANGE IN ADULTS WITH IMMUNE-MEDIATED THROMBOTIC THROMBOCYTOPENIC PURPURA

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Objective: Caplacizumab (CPLZ) is indicated, in combination with therapeutic plasma exchange (TPE) and immunosuppressive therapy (IST), for the treatment of immune-mediated TTP (iTTP). TPE is a mainstay of iTTP treatment but is burdensome and associated with complications. Real-world data suggest efficacy of TPE-free CPLZ regimens in iTTP, but clinical trial data is unavailable. This trial evaluates the efficacy and safety of CPLZ with IST without first-line TPE in adults with iTTP. **Methodology:** MAYARI (NCT05468320) is a Phase 3 multicenter study. Adults with a clinical diagnosis of initial/recurrent iTTP are eligible pending ADAMTS13 activity level confirmation within 48 hours of enrollment. Participants will receive CPLZ and IST. CPLZ

