

# CASE 006

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**A 55-year-old male presented with lower backache**

## CLINICAL HISTORY AND IMAGING FINDINGS

The patient, a 55-year-old male, presented with lower back pain radiating to the bilateral thighs since 15 days. Review of systems and relevant routine investigations revealed the following significant findings. Prostate specific antigen was 0.92 ng/ml, erythrocyte sedimentation rate (ESR) was 30 mm/hr, and C-reactive protein was positive. Considering the age and ESR, the differential diagnoses of multiple myeloma and metastatic carcinoma were considered. On ultrasonography, the prostate gland was enlarged with calcification.

Magnetic resonance imaging of the spine exhibited ill-defined patchy areas of bone marrow infiltration in the lumbar vertebrae appearing hypointense on T1 and hyperintense on T2 sequences, consistent with marrow replacement and differentials considered were either a metastatic prostatic carcinoma or multiple myeloma. Subsequently, a whole body bone scan performed showed lesions in the posterior parietal bone of the skull, faint foci in the ribs bilaterally, and tracer uptake in the 12th thoracic vertebra.

## HEMATOLOGIC FINDINGS

Routine hemogram was within normal limits. A bone marrow examination was performed which revealed hypocellular bone marrow with no increase in plasma cells or any evidence of metastases.