

PS2.201

Feet in multiple paths - diagnosis of multiple myeloma in primary health care

Mara Eliana Pereira, T Ferreira e Ferreira, G Costa Neves, S Borges, R Costa, C Dias, C Serrano, H Santos

USF Castelo, Charneca da Cotovia, Portugal

Corresponding author: Dr Mara Pereira, USF Castelo, Internato, Charneca da Cotovia, Portugal. E-mail: maraelianapereira@gmail.com

Multiple Myeloma it is a neoplasm of plasma cells, accounting for 1% of all cancers and 13% of haematological malignancies. Fundamentally affects men with an average age of 68 years. The main cause of death in these patients is infectious. 97% of diagnoses show a monoclonal peak electrophoresis of proteins. Being 20-30% asymptomatic, it is essential that the GP, following his patient basis, have this diagnosis in mind before symptoms of recurrent bone pain, frequent infections and blood counts with anemia normocytic normochromic and increased sedimentation rate. Man, 67 years old, married and retired. January presents to your GP cough and hemoptysis. Faced with an altered hearing, are asked to x-ray of the chest demonstrating deletion of costo-phrenic right breast. It is sent to the Pulmonology Diagnostic Center urgently, discarding the hypothesis of pulmonary tuberculosis. Analytically it is noted NN anemia 10,3gHg and VS133 mm/h. Antibiotic therapy was initiated at the first contact and when he return four days later, presents itchy, bleeding and necrotic lesions on both legs, which associates the possible allergy to nylon and/or antibiotic. Carried out an urgent referral to a dermatology consultation, being diagnosed leukocytoclastic injuries of the lower limbs. After this diagnosis, his GP asks to repeat hemogram and electrophoretic urgent proteins. Already in the hospital context and through the analyzes performed on an outpatient basis referred to above, it is concluded that the diagnosis of multiple myeloma, monoclonal IgG peak associated with hyperviscosity syndrome. The patient is hospitalized urgently, starting chemotherapy cycle. The Multiple Myeloma is a serious disease that is not diagnosed only in the hospital setting. Primary health care and the doctor-patient relationship established in the general practice consultation are critical for early diagnosis of this type of less frequent pathologies.