

Patient with Severe Akut Growth versus Host Disease including face and scrotum; A Case Report:

Zuhal Mehrekula, Duygunur Güneş, Ayşe Güngör, Asu Fergün Yılmaz, Filiz Vural, Seçkin Çağırğan.

Ege Üniversitesi Tıp Fakültesi Hastanesi İç Hastalıkları Hematoloji Bilim Dalı Kök Hücre Transplantasyon Ünitesi, Bornava, İzmir

Introduction: Acute graft versus host disease is an important factor that increases the mortality and morbidity in especially patients with unrelated and haploidentical allogeneic stem cell transplanted. Here we represent a case with myelodysplastic syndrome refractory anemia with excess blast-I (MDS RAEB-I) who is transplanted from his HLA full matched daughter.

Case: A 64 years old male patient who was transplanted with a non myeloablative conditioning treatment due to MDS RAEB-I that was refractory to previous induction therapies. Both the thrombocyte and neutrophil engraftments were documented at day +12. At day +30, 100% donor chimerism was obtained. He was suffered from an uncontrolled fever with pain at his inguinal region after the day +10. The laboratory results revealed the severe elevation of liver transaminases. The liver biopsy was compatible with acute graft versus host disease. Under the immunosuppressant treatment with cyclosporine and prednisone intensive and disseminated edematous, hyperpigmented skin lesions over the face, scrotum and axillary region were appeared. With local treatments the lesions became hyperpigmented, hemorrhagic and serous in nature mostly around the eyes and mouth. Due to the lack of facial expression his face became like a mask face. Multiorgan failure was documented under local and systemic treatments and the patient was died at day +52.

Conclusion: AGVHD including diffuse and severe skin, especially face involvement is an important mortality and morbidity factor at patients with or without remission.

Key words:GVHD, Face, Scrotum, skin