

# RENAL AFFECTION IN MYELOMA

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## INTRODUCTION-OBJECTIVES

- Renal affection in multiple myeloma (MM) is common, sometimes it is disease revealing and worsening the prognosis.
- Its incidence varies from 30 to 50 % depending on the series.
- It is related to the toxic effect of light chains excessively produced.
- The myelomatous tubulopathy is the most common complication, rarely, there is an AL amyloidosis or nodular glomerulosclerosis.
- This study's objective is to describe the epidemiological, clinical, biological and evolutionary characteristics of renal disease in MM.

## METHODS

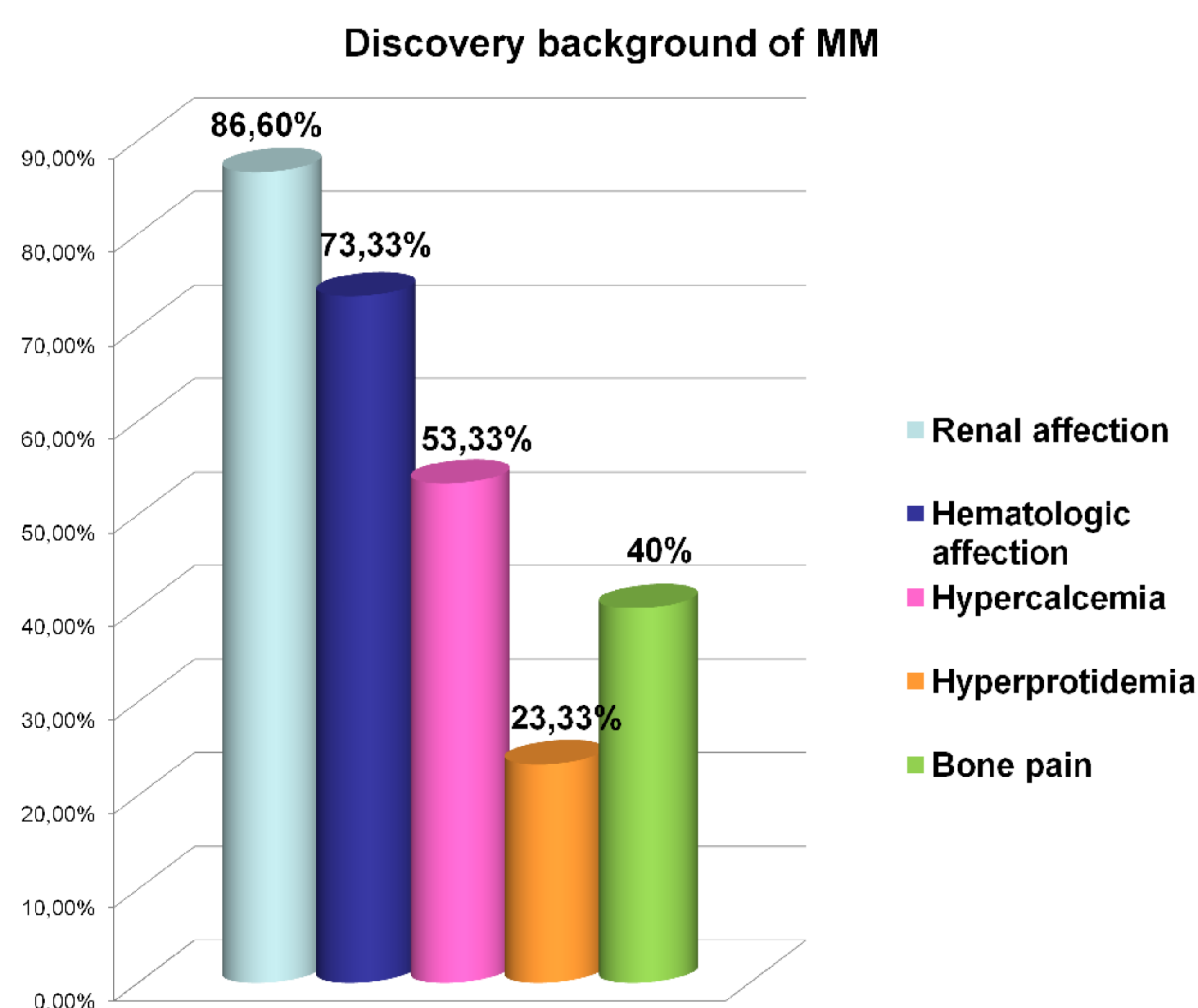
- Retrospective study along 6 years (2009-2014) including 30 patients with MM complicated by renal affection collected over 6 years.

## RESULTS

- There were 18 men and 12 women with a mean age of 57.5 years [42 years - 83 years]. 30% of the patients were hypertensive, 10% diabetes. Only Three patients are followed for MM.
- MM diagnosis was retained on a pathological bone marrow plasma cells in all cases and the presence of a monoclonal gammopathy electrophoresis and / or Immunoelectrophoresis and radiographic lesions in 17 cases.
- The Renal failure (RF) is noted in 29 cases associated to proteinuria in 19 cases and hematuria in 7 cases .An isolated proteinuria and nephrotic syndrome were noted in 2 cases. RF was rapidly progressive in only one patient (table 1).
- Acute renal failure is associated to extracellular dehydration in 53% of the cases.
- Renal affection was chronic in 22 patients related to a histologically confirmed myeloma tubulopathy in 10 cases and renal amyloidosis in only one case.
- Chemotherapy was administered based on: melphalan- -thalidomide dexamethasone (2 cases), thalidomide-dexamethasone (3 cases), -endoxan dexamethasone-thalidomide (5 cases), dexamethasone alone (10 cases), bortezomib + thalidomide (2 cases) and vincristine + adriablastine + dexamethasone (3 cases) .
- Nineteen patients required hemodialysis as urgent management with 4 sessions average.
- We noted 7 cases of deaths.

Table 1 : renal events in our series

RENAL EVENTS	PERCENTAGE
Glomerular syndrome	80%
Isolated renal failure	10%
Nephrotic syndrome	6.66%
Isolated proteinuria	3.33%
Rapidly progressive glomerulonephritis	3.33%



## CONCLUSION

- Multiple Myeloma kidney disease is often associated to significant morbidity and mortality. It is a serious complication of MM. The renal biopsy is not systematic. Chemotherapy is the main treatment.
- It is potentially avoidable through the eviction of nephrotoxic medications, good hydration and alkalinization with early and effective treatment.

## BIBLIOGRAPHIE

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