

## Neoplasm Associated with Hairy-Cell Leukemia

### A Case Report

Although several instances of secondary tumors and hairy-cell leukemia (HCL) have been reported, it is not known whether HCL is associated with an increased risk of second tumor formation. We have seen a patient with a well-proved HCL in which a squamous cell carcinoma of skin developed.

A 50-year-old male patient was admitted in March 1977 because of malaise, weight loss, fever and night sweats. The physical examination showed hepatomegaly of 4 cm and splenomegaly of 5 cm. ESR was 25 mm/h; Hb 8.4 g/dl; WBC  $4.2 \times 10^9/l$  with 25% of hairy cells. Cytochemical studies displayed positivity of tartrate-resistant acid phosphate (TRAP) in hairy cells. A bone-marrow biopsy was consistent with the diagnosis of HCL. In May 1977 a splenectomy was carried out. The histopathological study of spleen was also demonstrative of HCL. In September 1979 a skin lesion in the right frontal area appeared. The biopsy was demonstrative of squamous cell carcinoma. 11 months after its surgical excision (July 1980), two prominent adenopathies appeared in pre- and retro-auricular right areas. Their biopsy was demonstrative of metastasis from the primary squamous cell carcinoma of skin.

In reviews of large series of patients with HCL the association of this disease with other neoplasms is not considered. At the best of our knowledge, only a few cases [1-3] of HCL associated with other neoplasms have been reported: prostatic carcinoma (2 cases), carcinoma of lung (2 cases), bowel carcinoma (2 cases), multiple myeloma, squamous cell carcinoma of skin and large-cell lymphoma. However, a casual association cannot be excluded in all these cases. Although the cellular origin of HCL is disputed, in the great majority of cases it seems to be a neoplasm of B-cell lineage. Since chronic lymphatic leukemia (CLL), a well-recognized B-cell neo-

plasm in most cases, is often associated with other neoplasms [4], the possibility of secondary tumors should be kept in mind in the management of patients with HCL.

### References

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Emili Montserrat, MD, Benet Nomdedeu, MD, Cristina Diumenjó, MD, M. Teresa Estrach, MD, Ciril Rozman, MD  
Postgraduate School of Hematology 'Farreras Valentí', Hospital Clínico, University of Barcelona, Spain

All correspondence to:  
Dr. Emili Montserrat,  
Escuela Profesional de Hematología 'Farreras-Valentí',  
Hospital Clínico y Provincial,  
Casanova, 143, Barcelona-36 (Spain)