

Myelodysplastic syndrome-MDS



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Myelodysplastic Syndromes (MDS)

- **Definition: Myelo = marrow**
Dys = irregular
Plasia = proliferation

- **Normal bone marrow makes healthy blood cells
(red, white and platelet cells)**

What happens in MDS?

- In MDS, the bone marrow makes the blood cells badly (dysplasia), causing low blood counts and cells that don't work very well



- **Group of clonal stem cell disease**
- **Abnormal proliferation**
- **Asynchronous and delayed maturation**
- **Early apoptosis**
- **Ineffective hematopoiesis**
- **Hypercellular BM+ peripheral blood (PB) cytopenia.**
- **Quantitative & qualitative abnormalities**
- **Progressive BM failure**
- **Increased risk of AML**



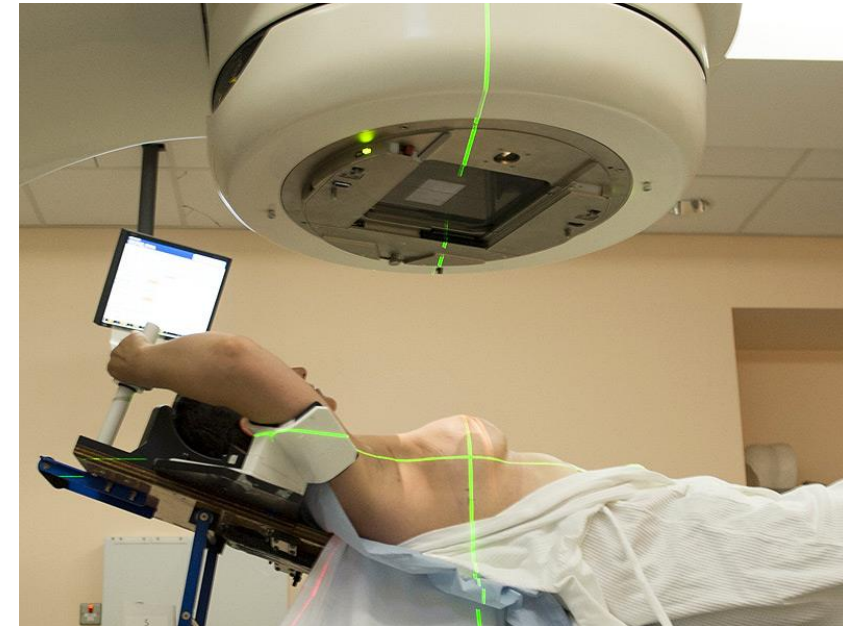
MDS



PRIMARY

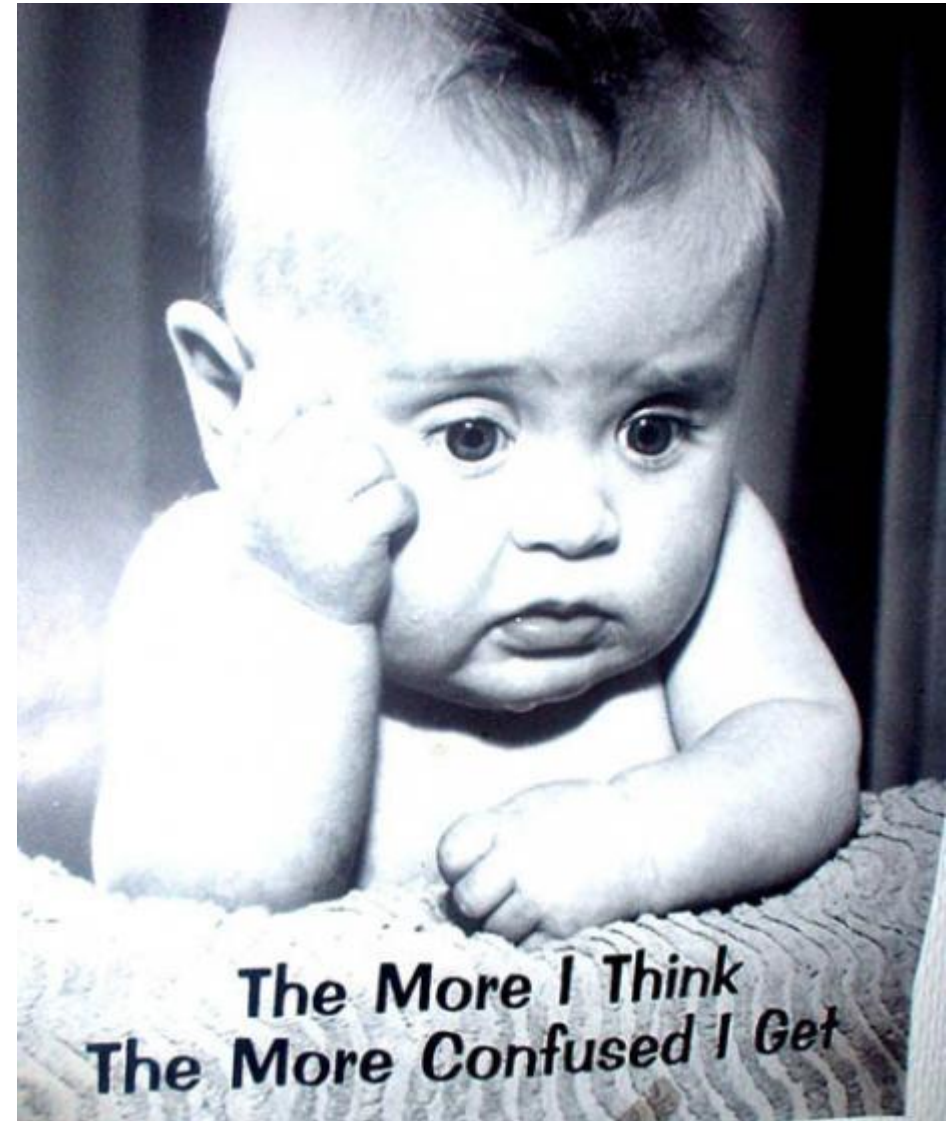
SECONDARY

- Chemotherapy
- Radiotherapy



Pathogenesis

- Poorly understood





Clinical features

- Disease of old age-median 70y
- Asymptomatic
- Related to cytopenias
- anaemia > other cytopenias
- Organomegaly -infrequent



DD

- Excess alcohol
- Megaloblastic anaemia
- Infections-Parvovirus/HIV
- Recovery from Chemotherapy
- GCSF treatment

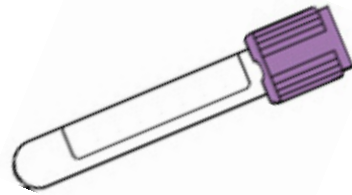


Investigations

Rule out other causes **confirm the diagnosis of MDS**

EX: B 12/folate def

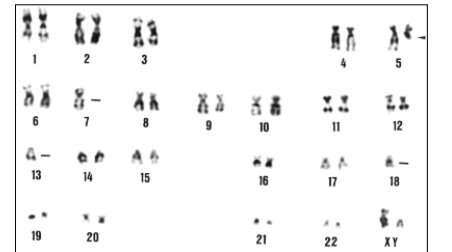
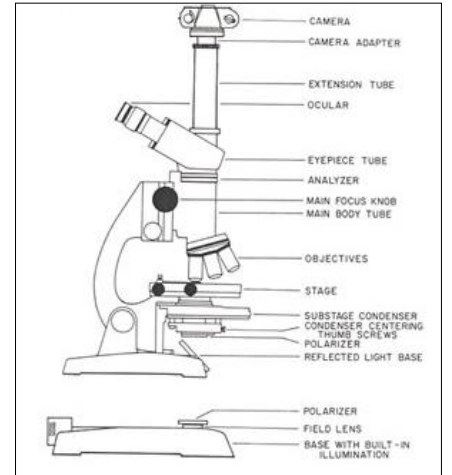
FBC+BP



BM + iron stain



Cytogenetic



1. Peripheral blood

1. Cytopenias

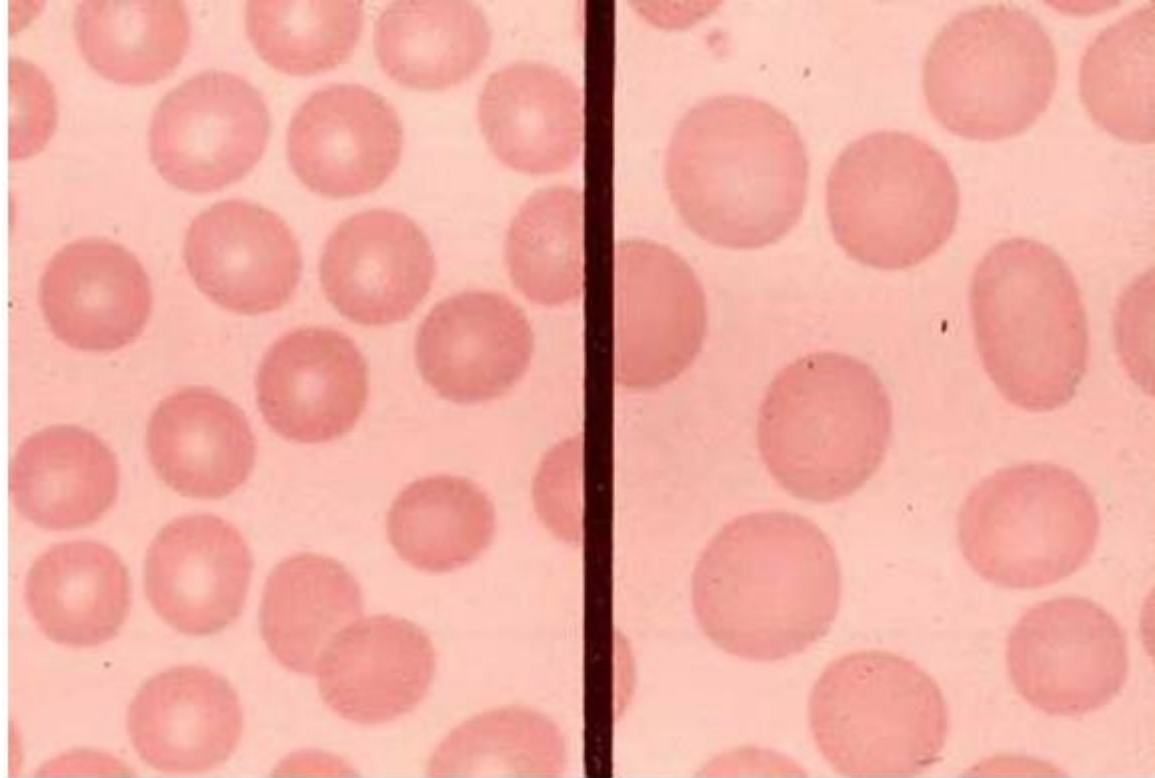
2. Dysplastic features

3. Immature cells



MDS-Red cells

- **Macrocytes**



normal red cells macrocytic red cells

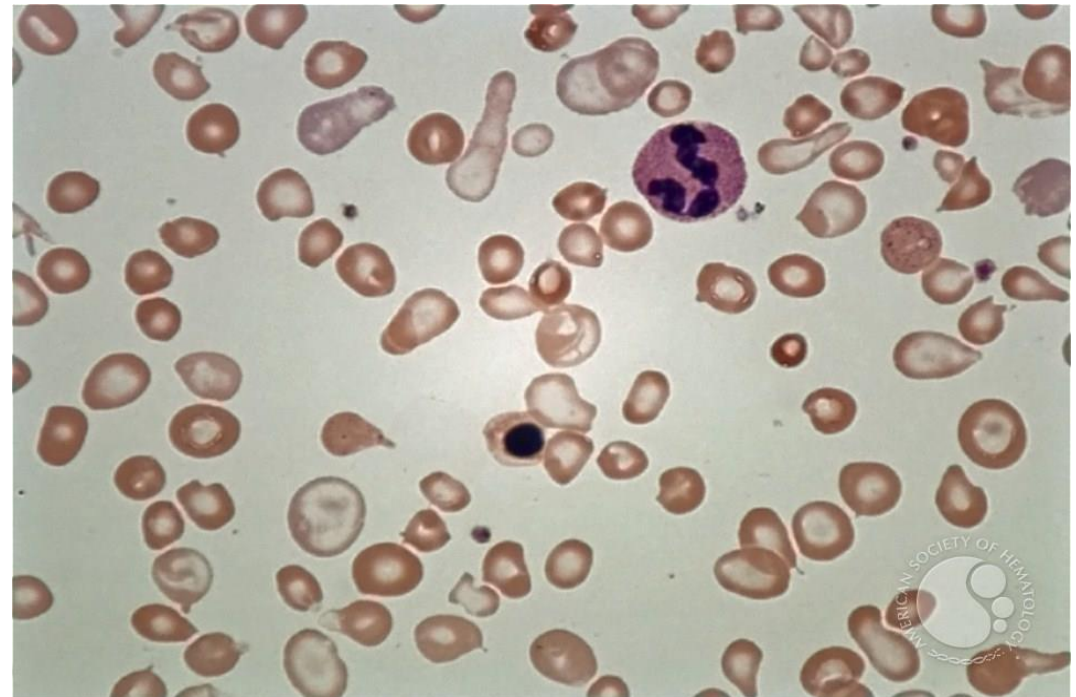
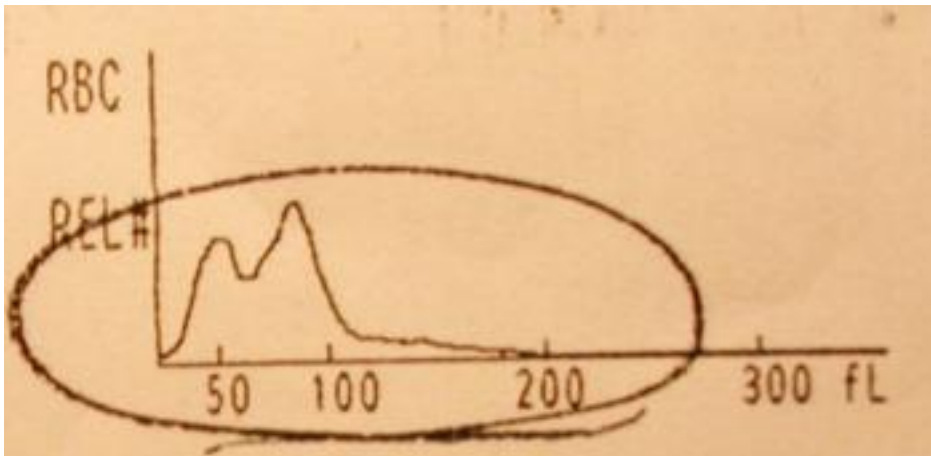
MDS –Red cells

Dimorphic

Hypochromic-occasionally

NRBC

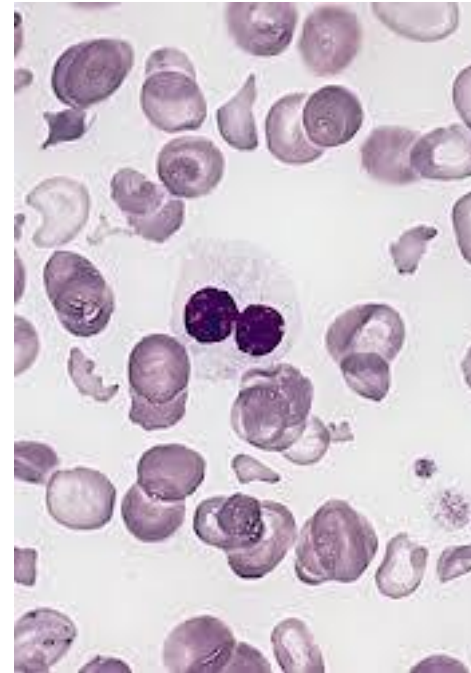
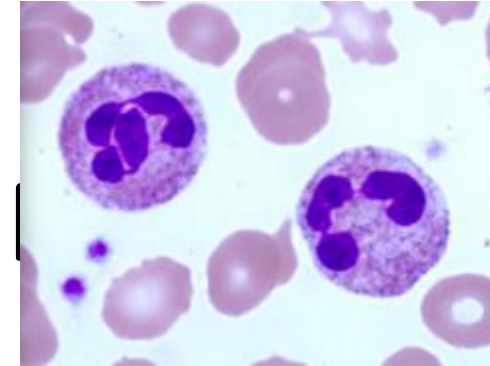
Low reticulocyte count



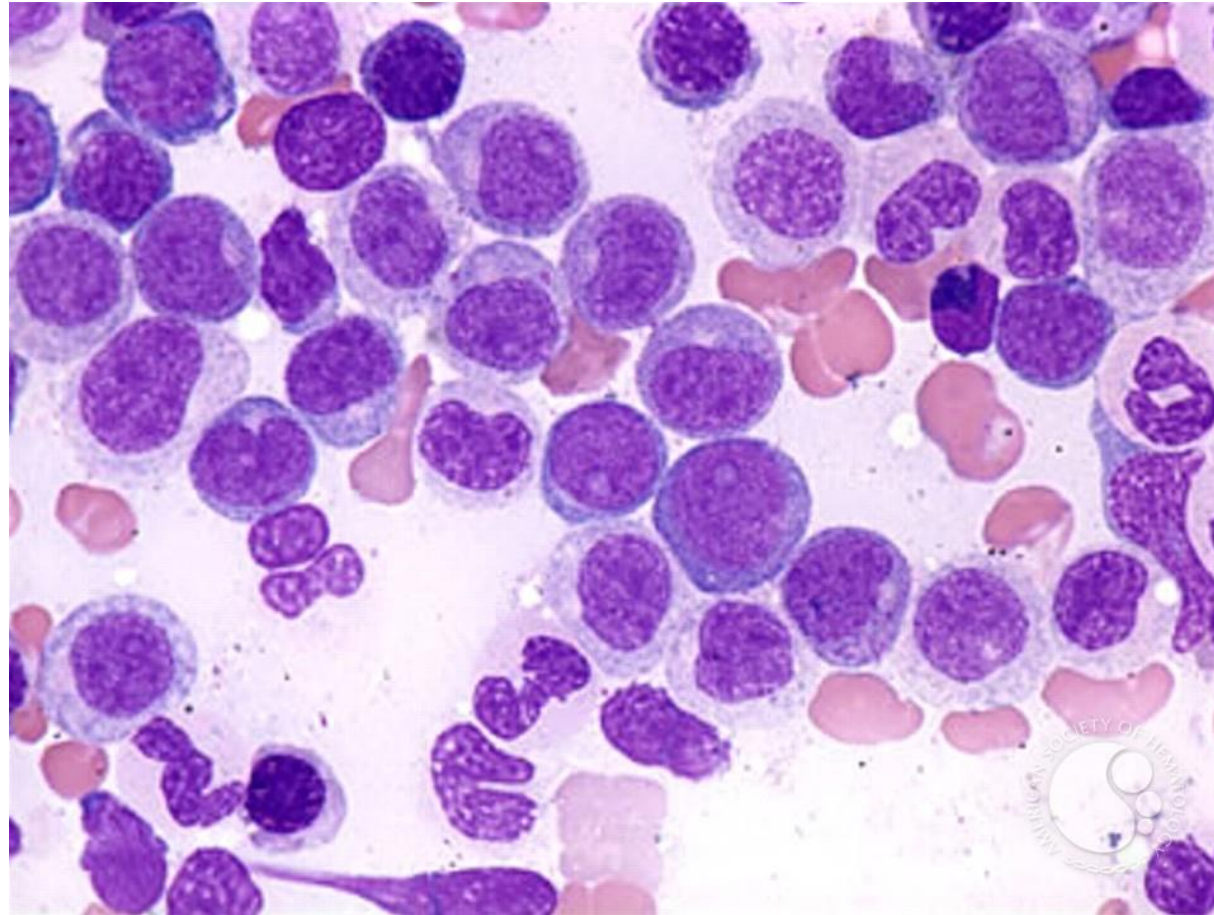
Dimorphic populations

White cells

- Leucopenia
- Granulation-frequently lack of granulation
- Lobes-Hypolobated-**Pelger abnormality**
- Immature forms-Myeloblasts
- Function-Impaired

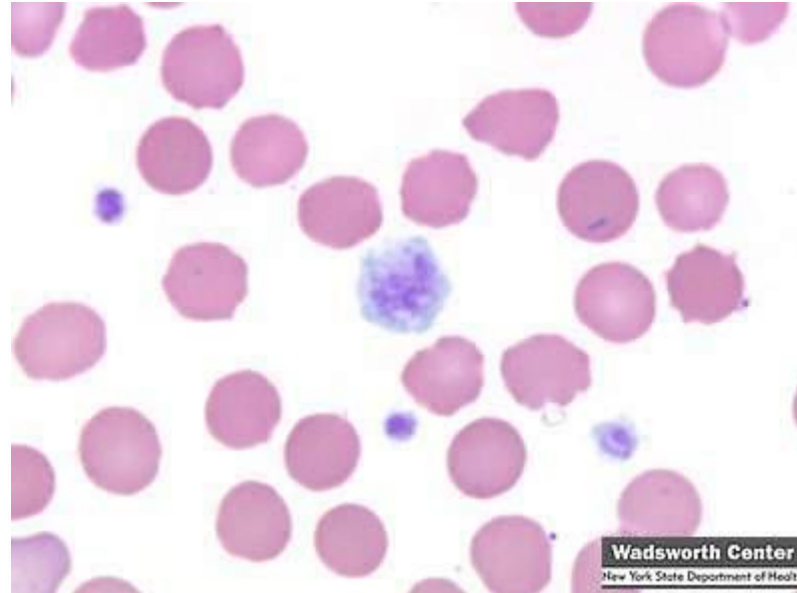


Blast cells



Platelets

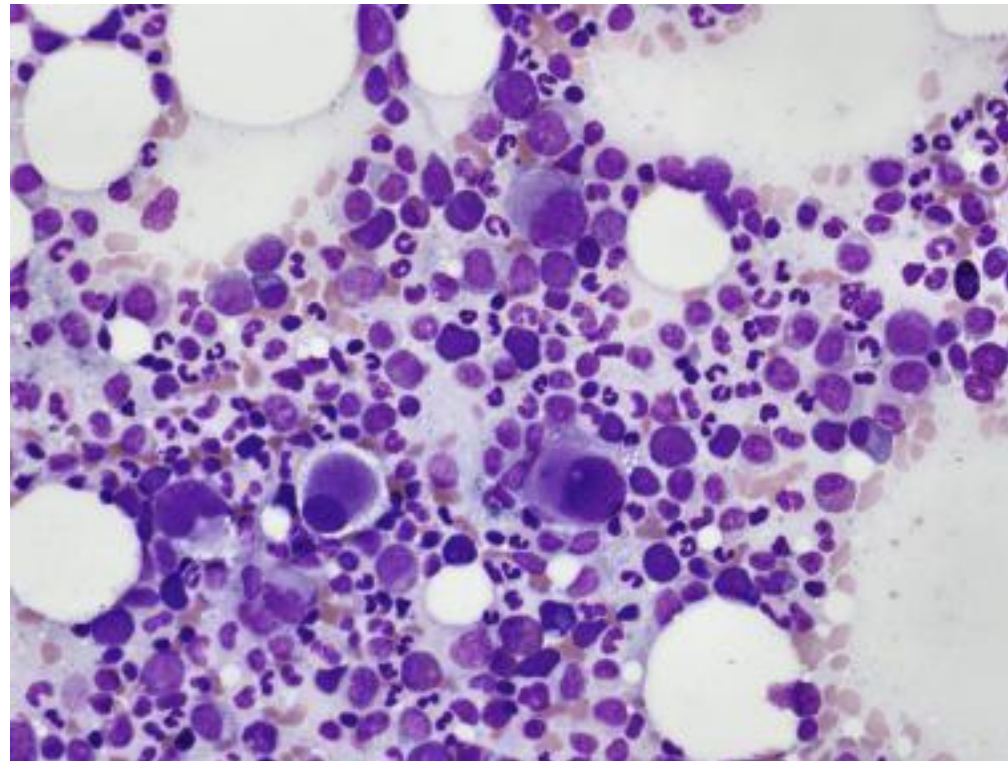
- Low
- 10%-Thrombocytosis
- Unduly large or small



BM aspiration and trephine biopsy

Hypercellular

10% of the cells in a lineage should be dysplastic



Erythropoiesis

Hypercellular

Dyserythropoietic features

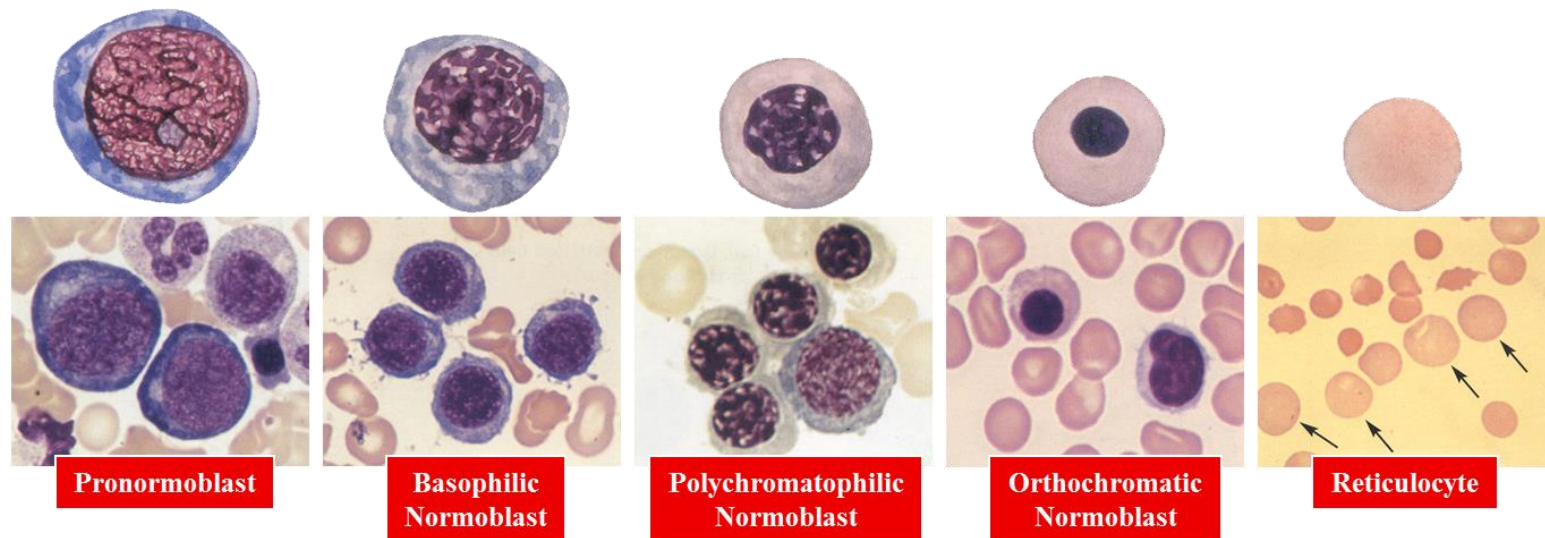
Multinucleate erythroblasts

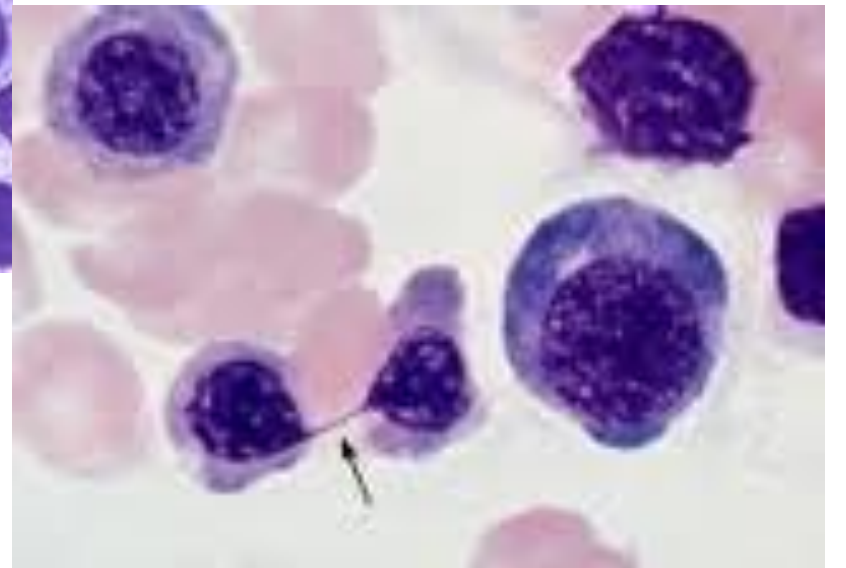
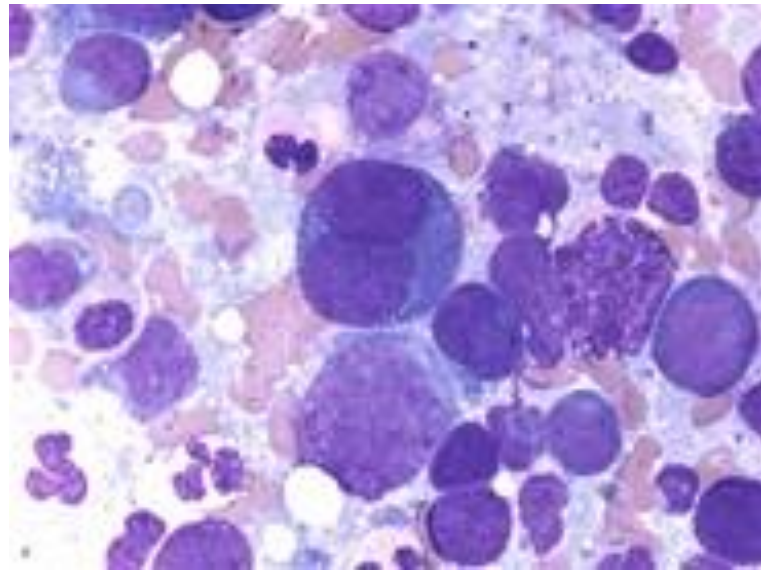
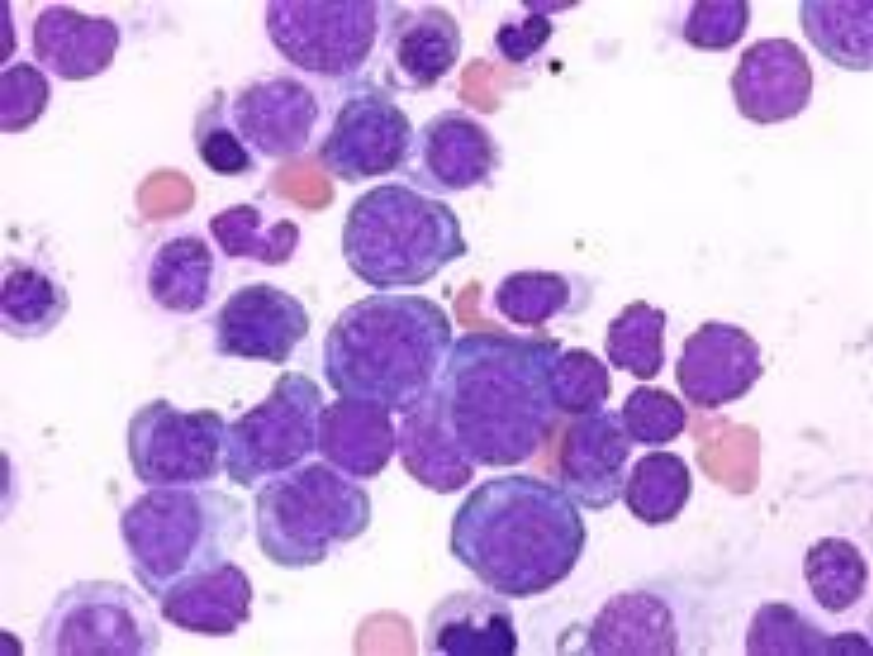
Internuclear, Intercytoplasmic bridges

Nuclear budding

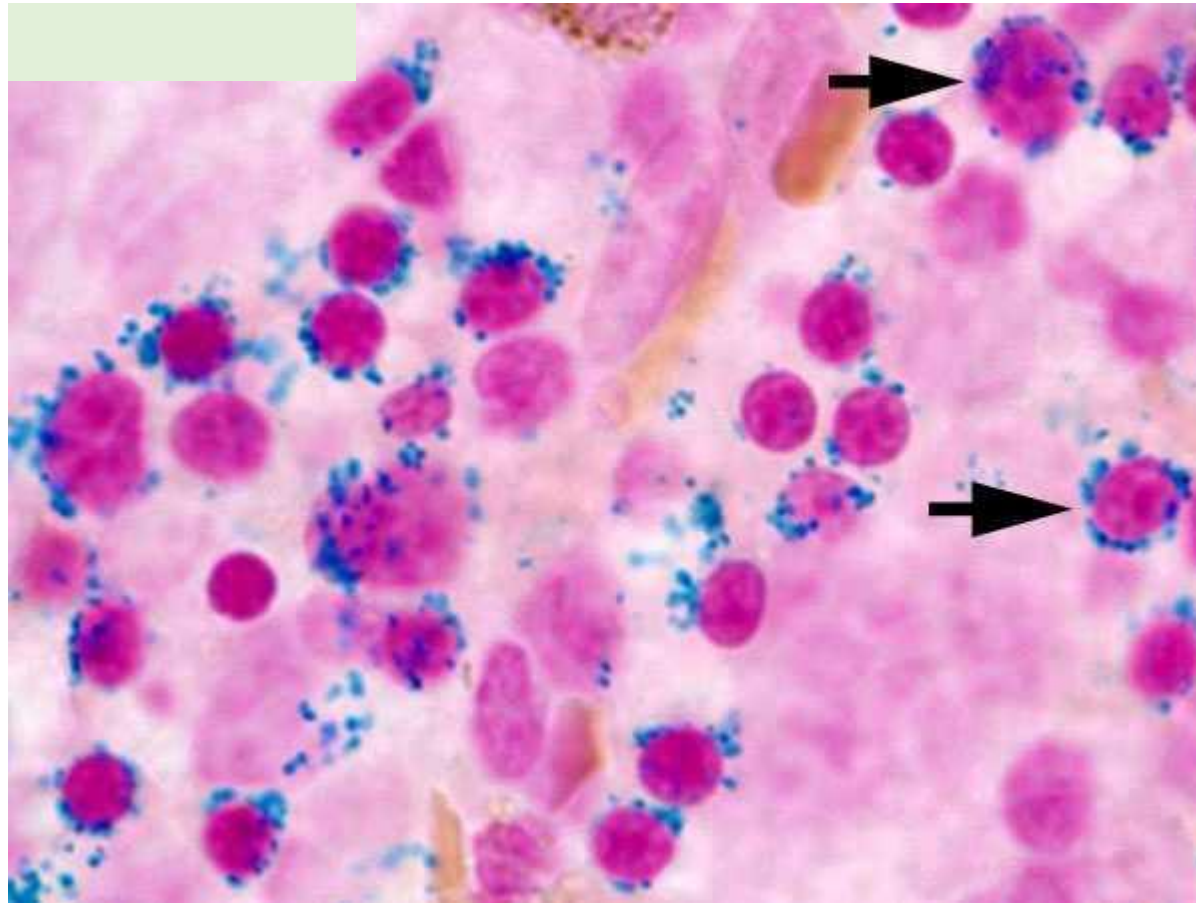
Megaloblasts

Iron stain – Ring sideroblasts



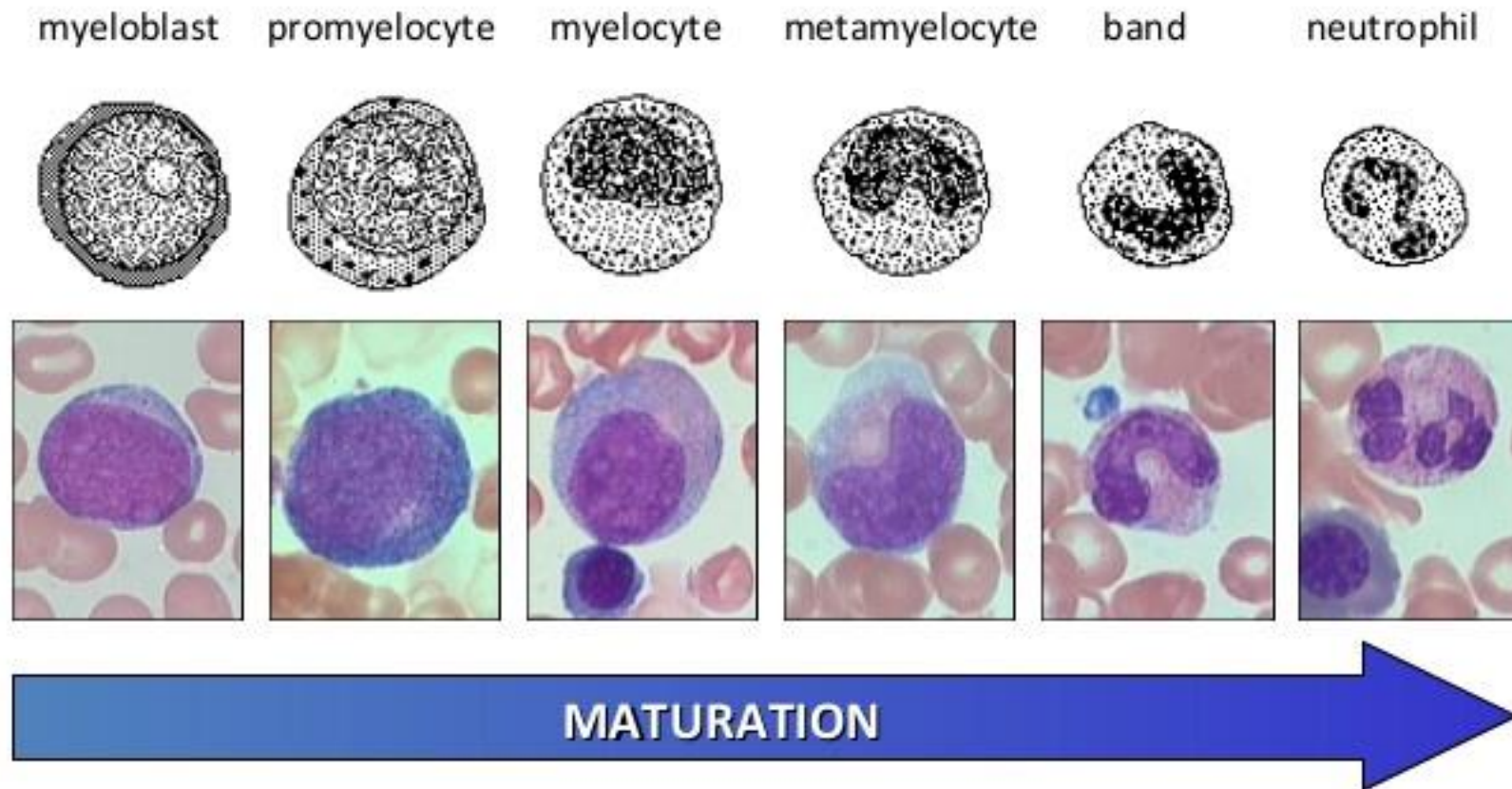


Iron stain-Ringed sideroblasts



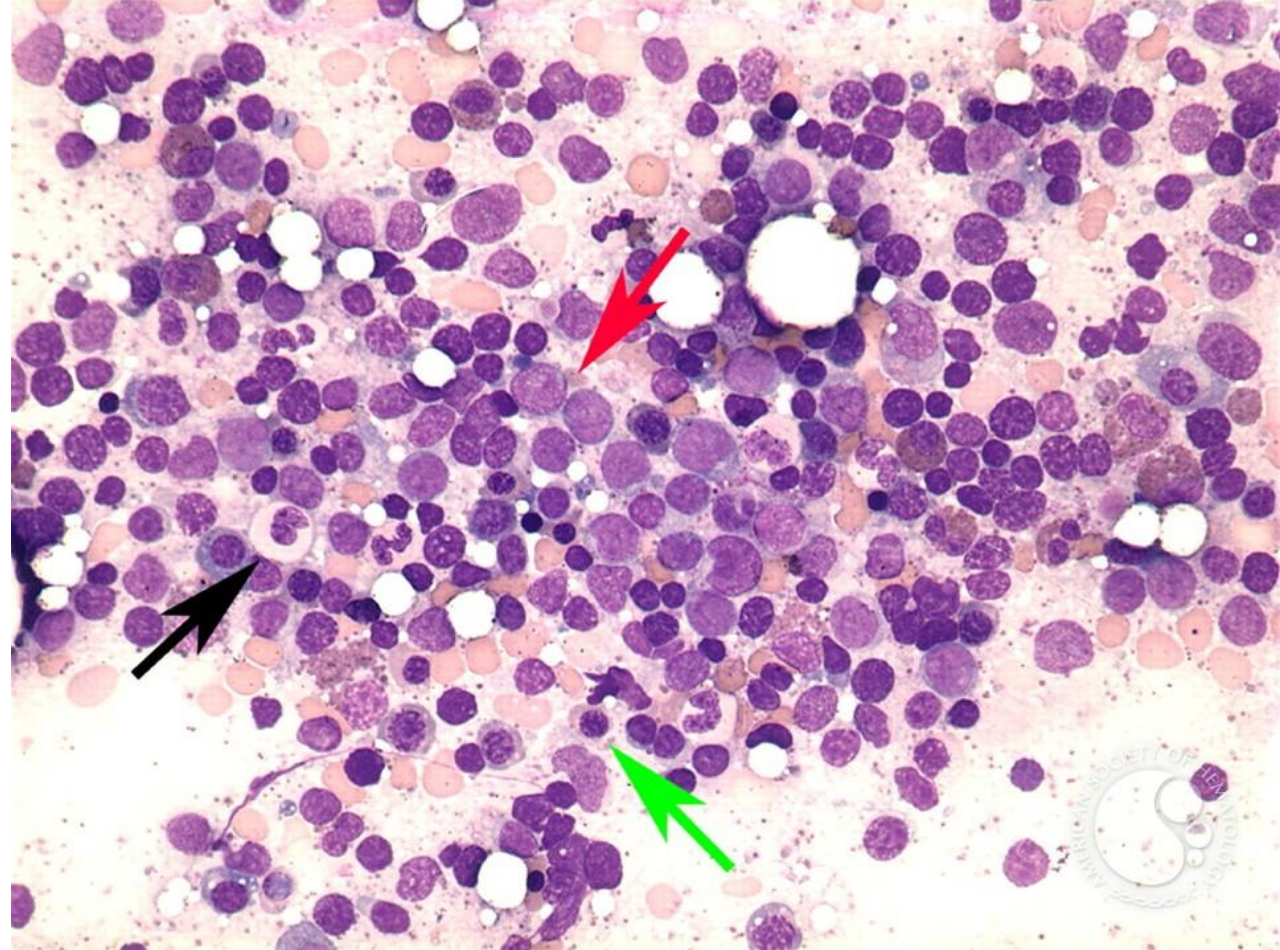
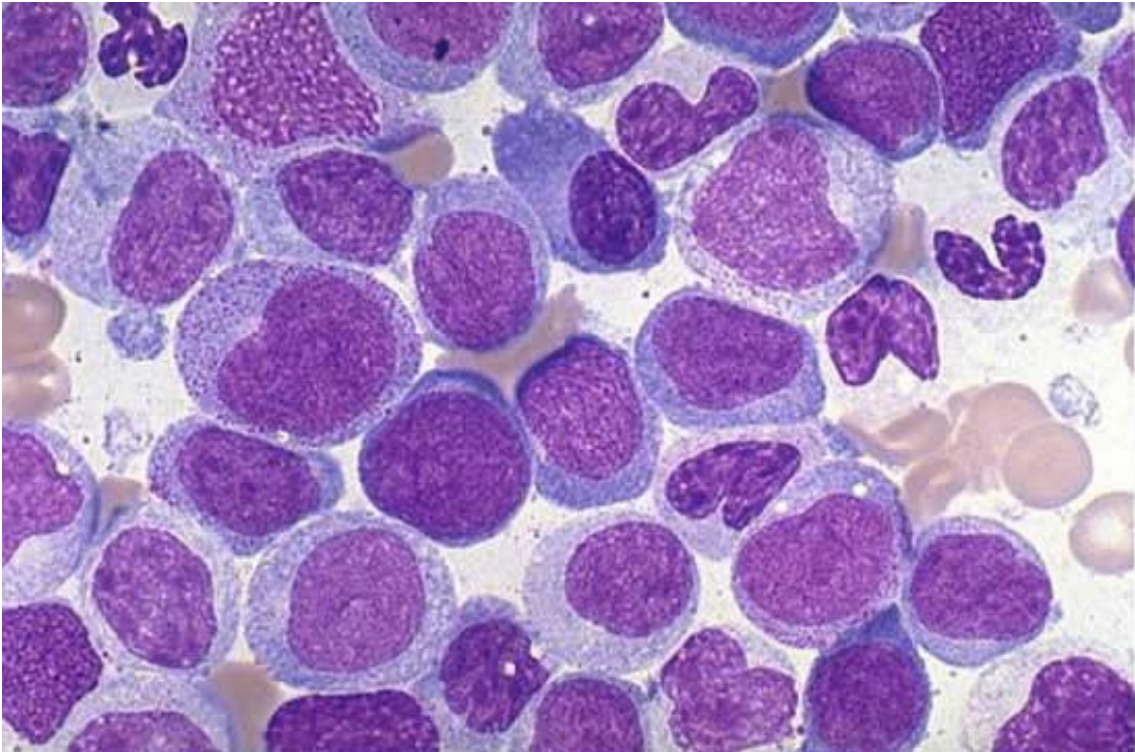
Granulopoiesis

Myeloid maturation



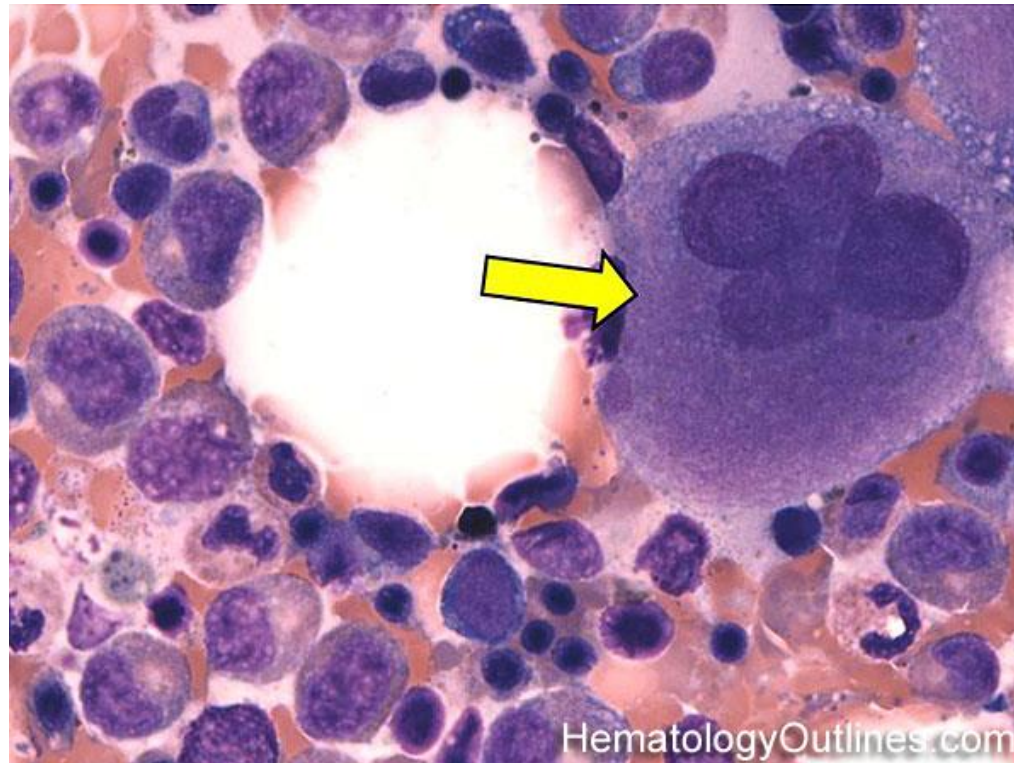
Granulopoiesis

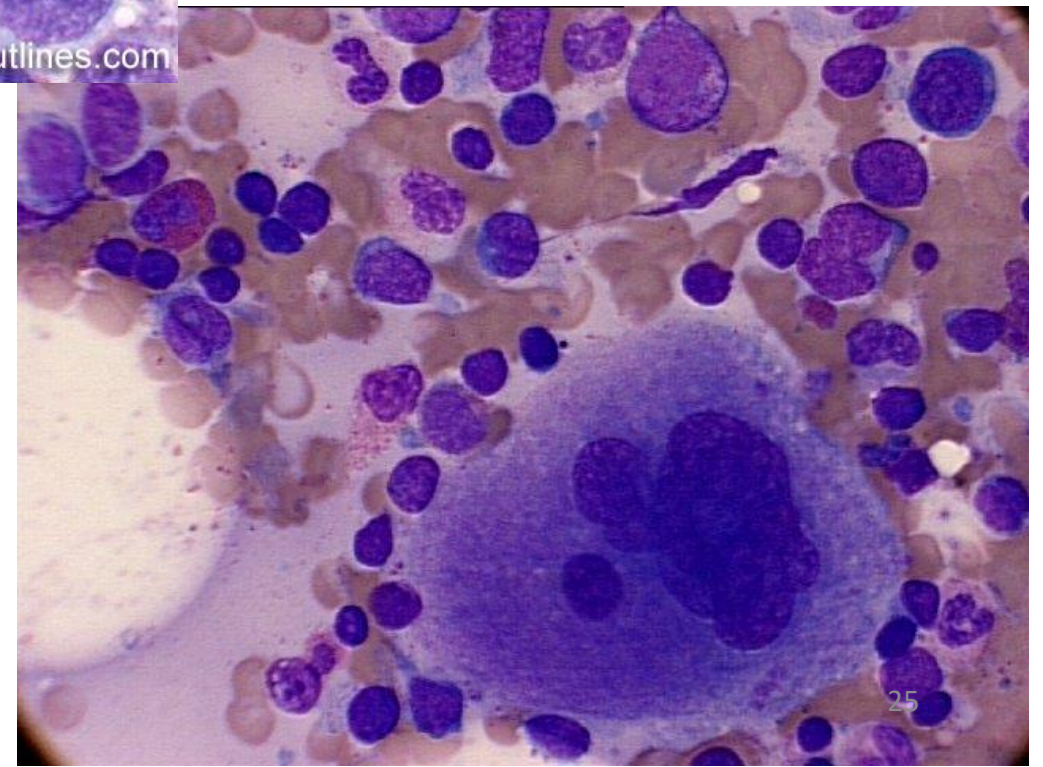
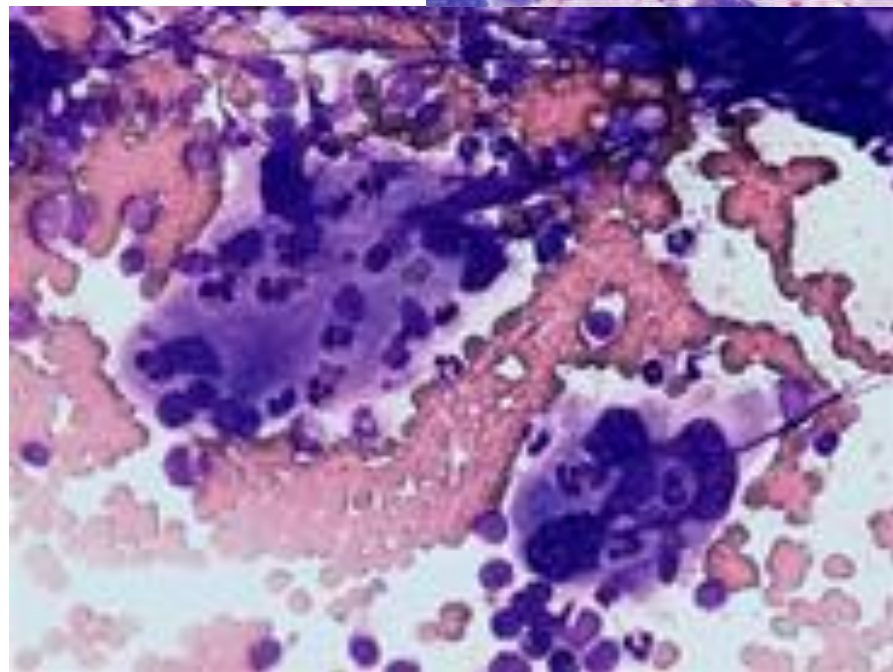
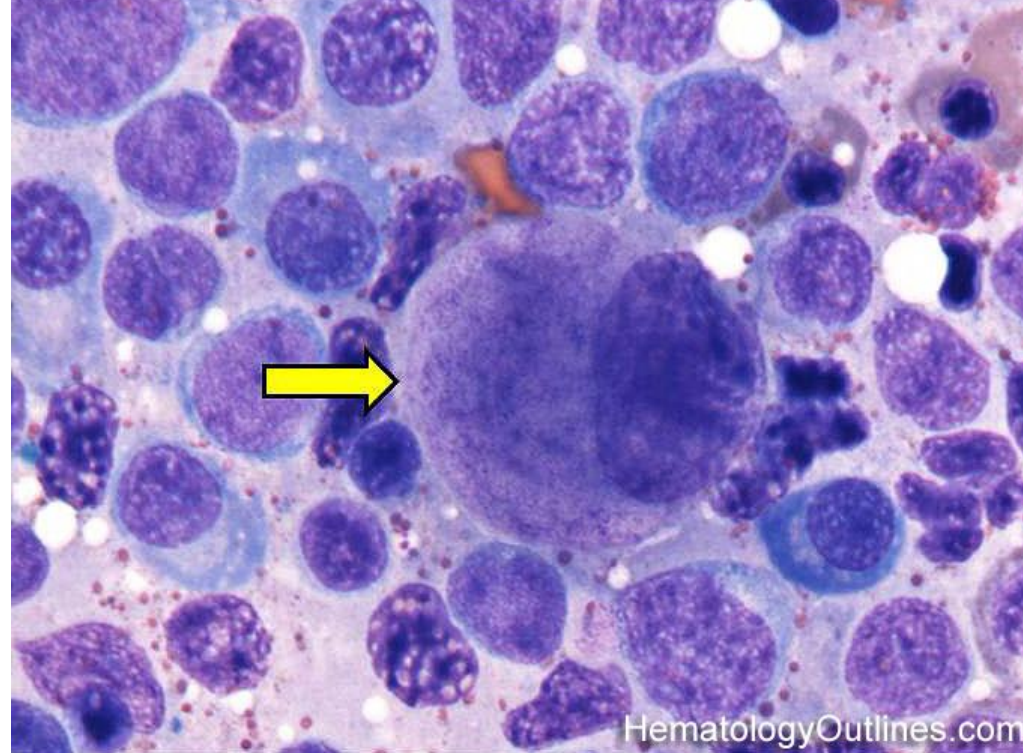
- Hyper cellular
- Defective granulation in precursors
- Increased blast cells



Thrombopoiesis

- Abnormal megakaryocytes
- Micronuclear, small binuclear, polynuclear forms
- Separation of nuclear lobes





Dysplasia in Myelodysplastic Syndrome

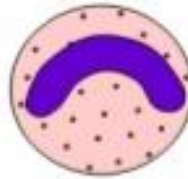
Dysgranulopoiesis



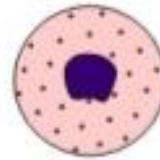
Normal segmented neutrophil



Pseudo-Pelger-Huet anomaly



Macrocytosis



Chromatin clumping



Hypo-, agranulation of cytoplasm

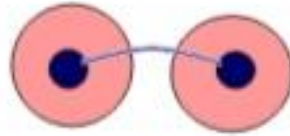


Asynchr. maturation nucleus - cytoplasm

Dyserythropoiesis



Normal erythroblast



Nuclear bridging



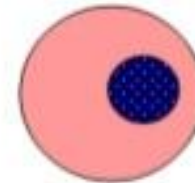
Nuclear lobulation



Multiple nuclei



Cytoplasmic granules



Macrocytic / megaloblastic changes

Dysmegakaryopoiesis



Normal megakaryocyte



Separated single Nuclei



Mikromegakaryocyte



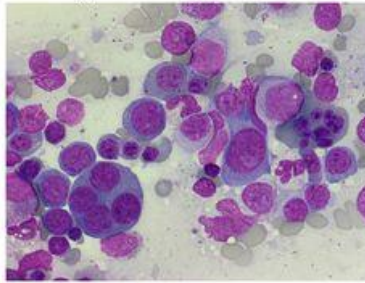
Small binucleated megakaryocyte



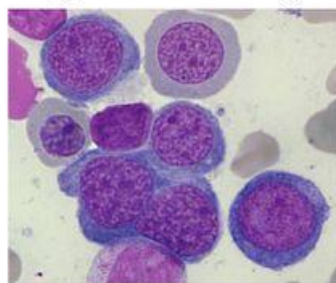
Rund, non-lobulated megakaryocyte

*Erythroid
lineage*

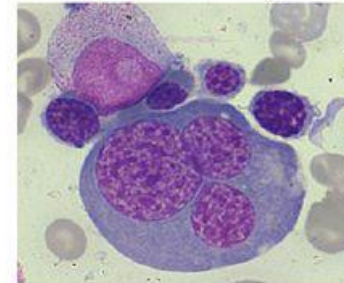
Erythroid hyperplasia



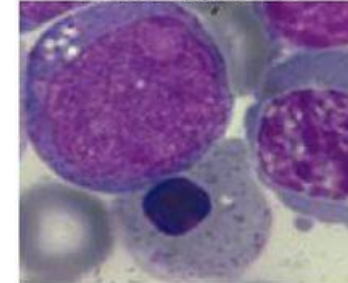
Megaloblastoid changes



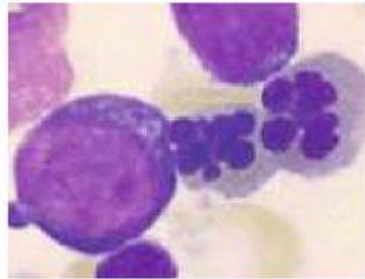
Multinuclearity



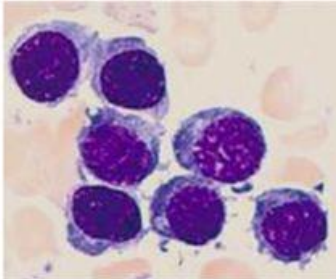
Nuclear pycnosis



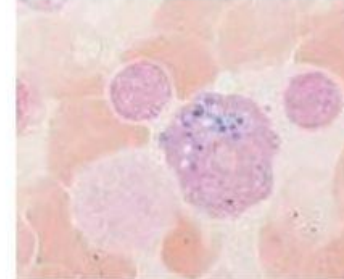
Nuclear lobulation



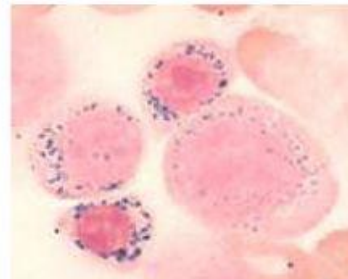
Cytoplasmic fraying



Ferritin sideroblast

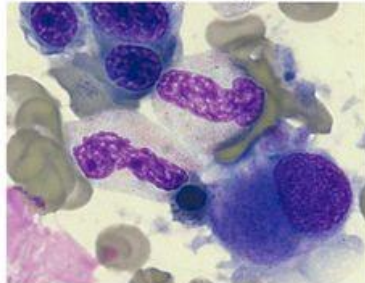


Ring sideroblasts

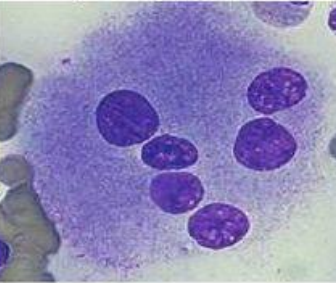


*Megakaryocyte
lineage*

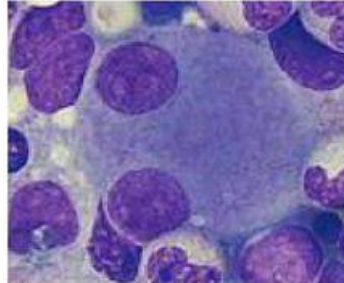
Micromegakaryocyte



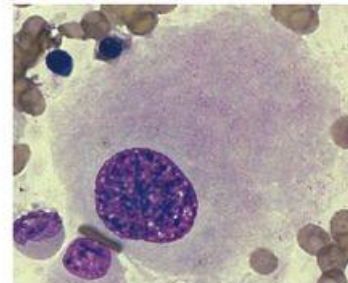
Multiple separated nuclei



Small binucleated cell

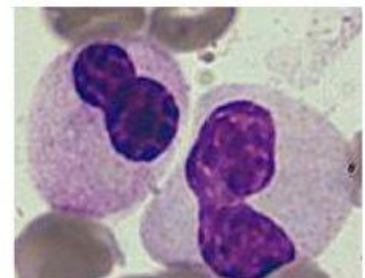


Monolobar cell

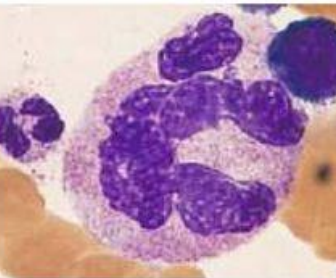


*Granulocytic
lineage*

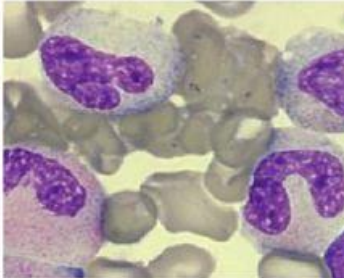
Pseudo-Pelger anomaly



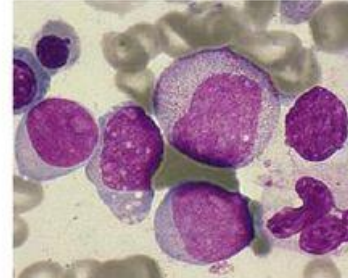
Abnormal nuclear shape



Hypo-degranulation



Myeloblasts



Cytogenetics

- More in secondary
- Chromosome 5/7-partial or total loss
- Trisomy 8
- Rearrangements
- Complex karyotype

WHO Classification

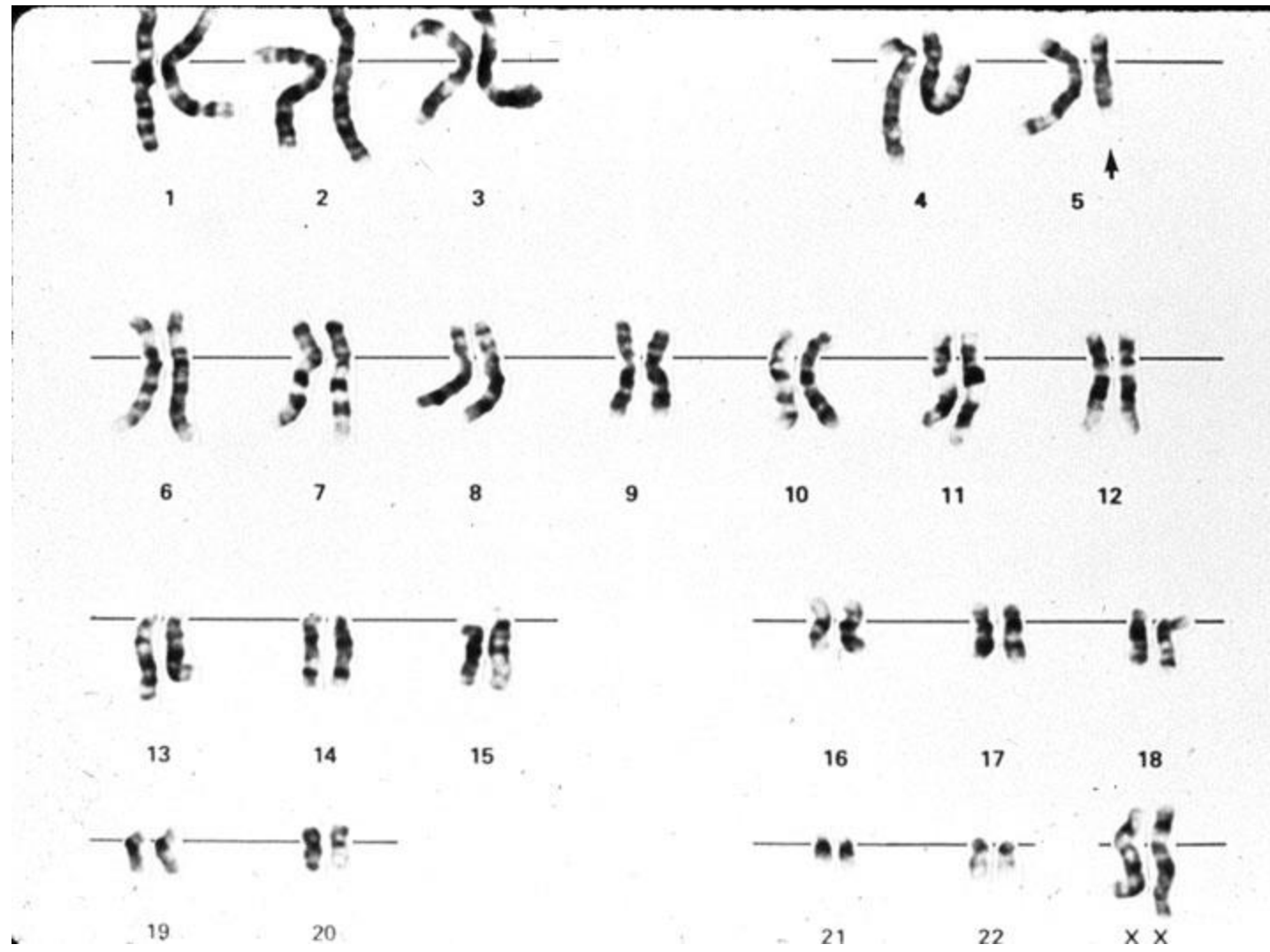
- FBC-Cytopenias
- BP-Dysplasia+ blast count
- BM-Dysplasia+ Blast count
- Iron stain
- Cytogenetics

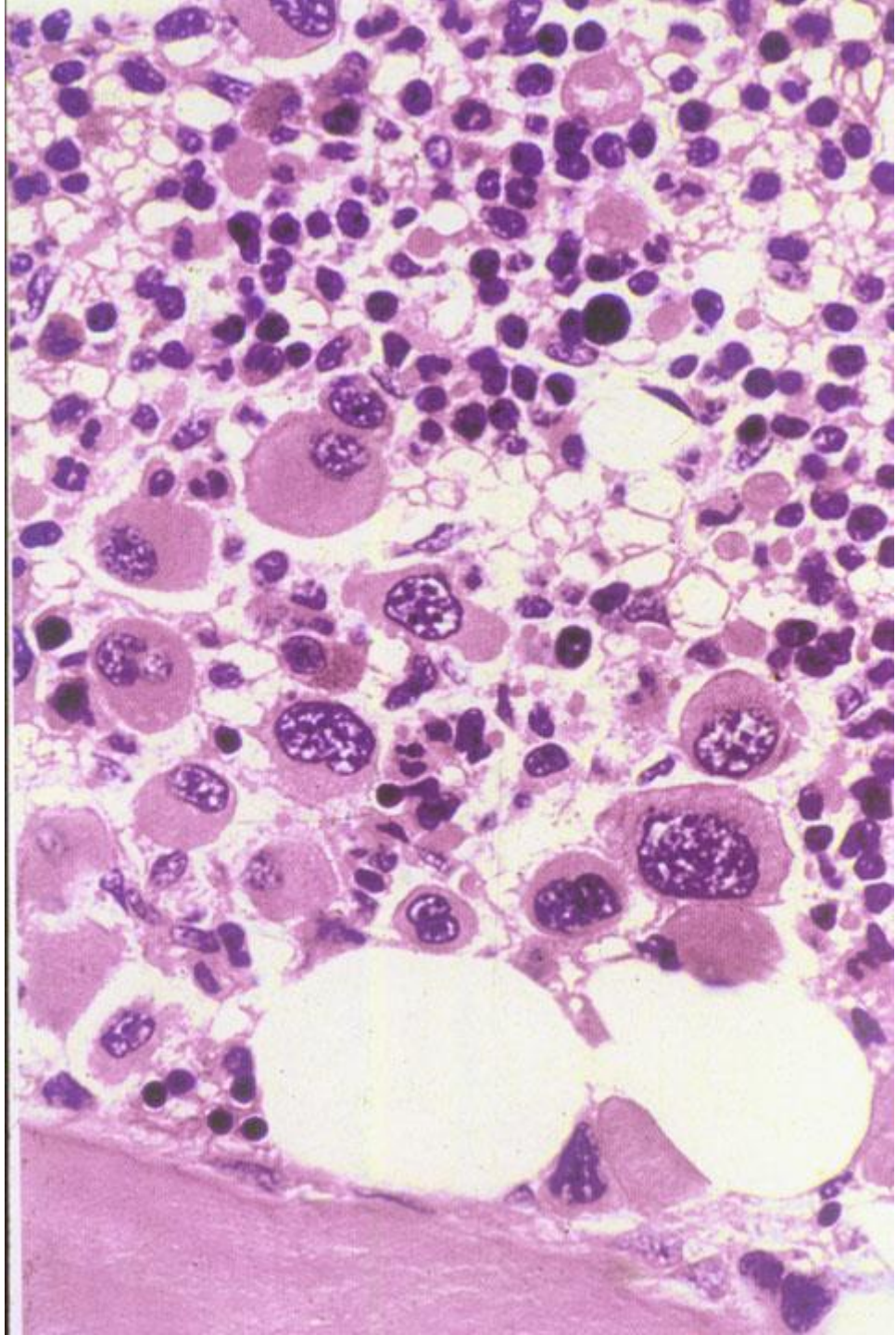
WHO Categories of MDS

- MDS with single lineage dysplasia
- MDS with **ring sideroblasts** (MDS-RS)
 - MDS-RS and single lineage dysplasia
 - MDS-RS and multilineage dysplasia
- MDS with multilineage dysplasia
- MDS with excess blasts
- MDS with isolated del(5q) MDS
- unclassifiable Provisional entity: Refractory cytopenia of childhood
- Myeloid neoplasms with germ line predisposition

5q- Syndrome

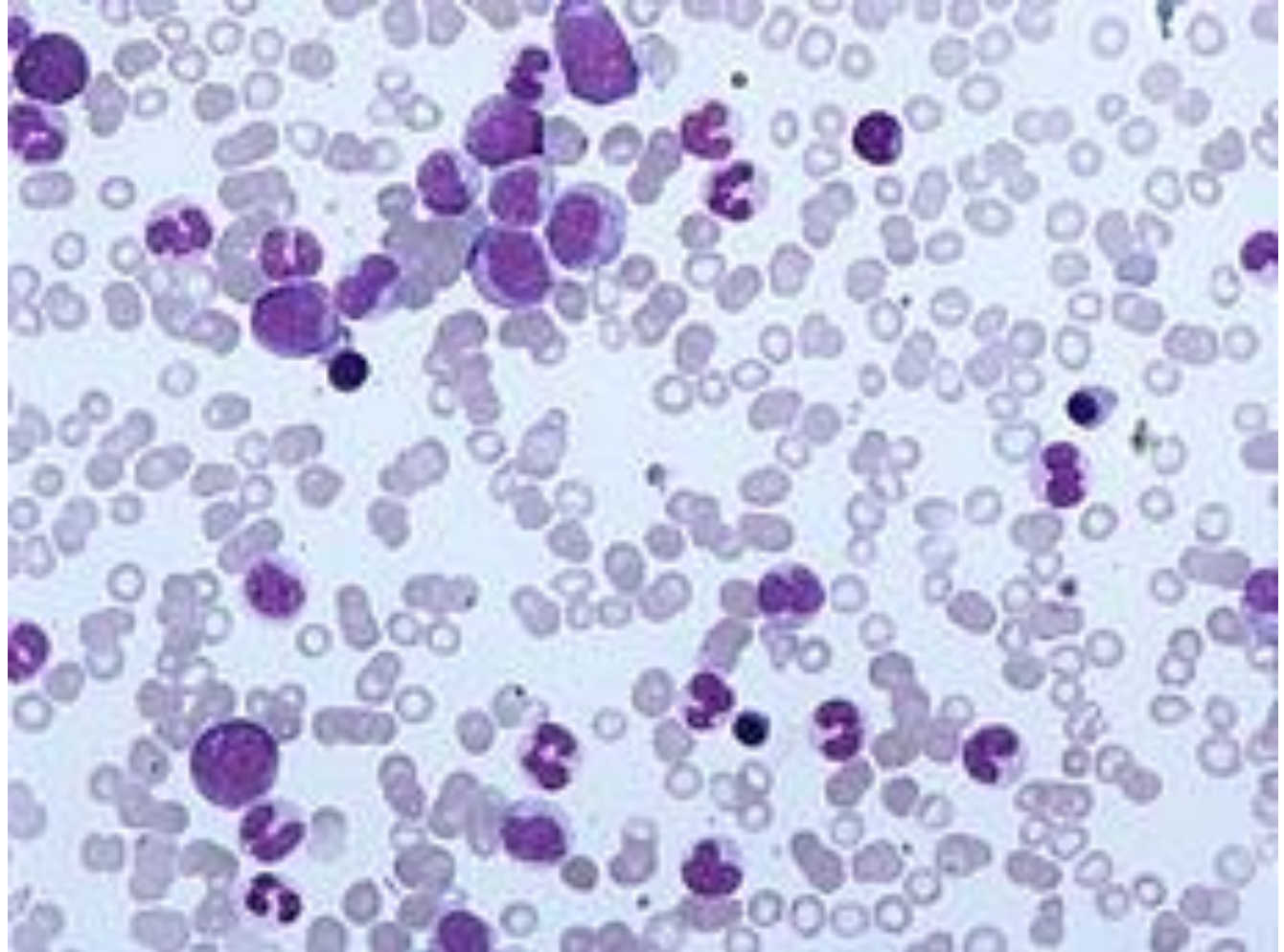
- Common in female
- Macrocytosis
- Thrombocytosis
- Good prognosis
- Hypolobated/ monolobated megakaryocytes





CMML

- Monocytosis
- Blasts < 20%
- Dysplasia



Treatment

- Options:
 - Observation



Supportive care



blood and blood products



Antibiotics

Growth factors-Erythropietin , GCSF



Drugs-

Lenolidomide-5q- Xn

Hypomethylating agents (Azacitidine, Decitabine)

Chemotherapy



Myelodysplasia

Bone marrow transplantation

BMT is not for everyone

High mortality rates.

BMT is applicable in
'selected' older adults



MDS

- At the end of this lecture student should be able to:
- Define MDS
- Describe the clinical features of MDS
- List the investigations needed for the diagnosis MDS
- Describe the blood and BM abnormalities in MDS
- Describe the principles of management of MDS

Summary

1. **MDS** is not one disease, but a group of disorders that cause the bone marrow to fail
2. **Diagnosis**-FBC+BP,BM+Iron stain,Cytogenetics
3. **Treatments** range from 'supportive' to the 'intensive'.



Thank you

- 60 year old man presented with tiredness. His Hb is 9g/dl.MCV is 110fl.

What are the differential diagnosis

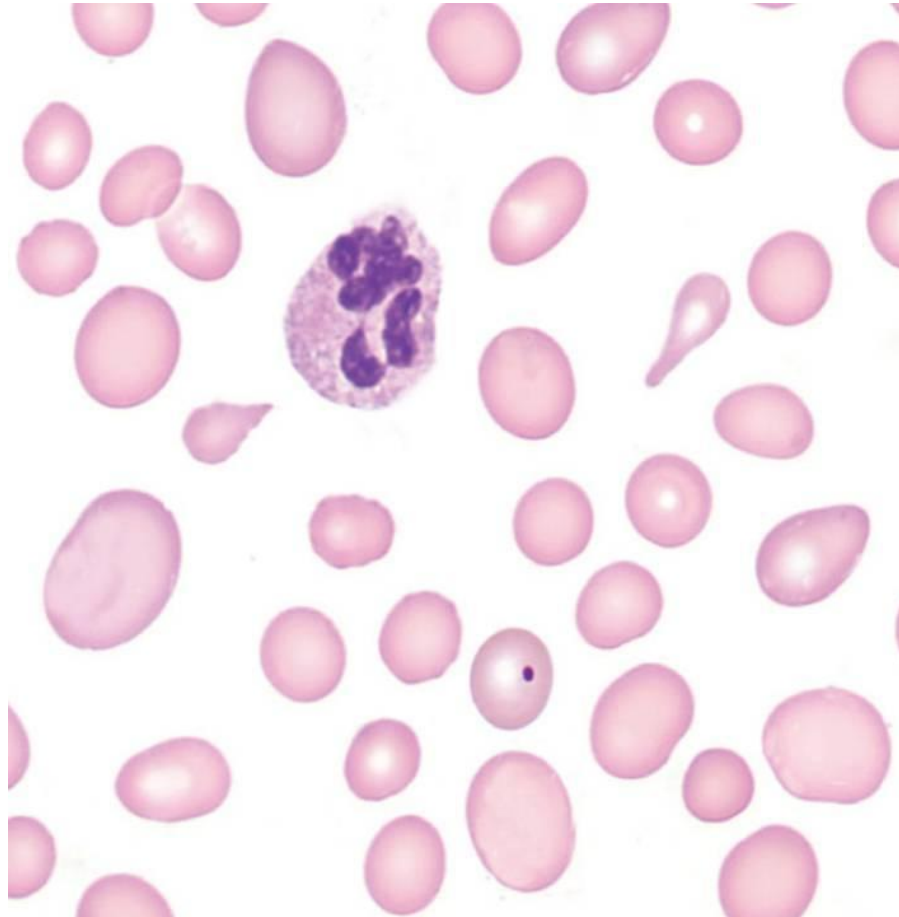
- B12/folate deficiency
- Liver disease
- Hypothyroidism
- Iron deficiency
- Anaemia of chronic disease.

- 60 year old man presented with tiredness. His Hb is 9g/dl. MCV is 110fl.WBC- 1.5×10^3 /L,Platelet-80,000/cumm

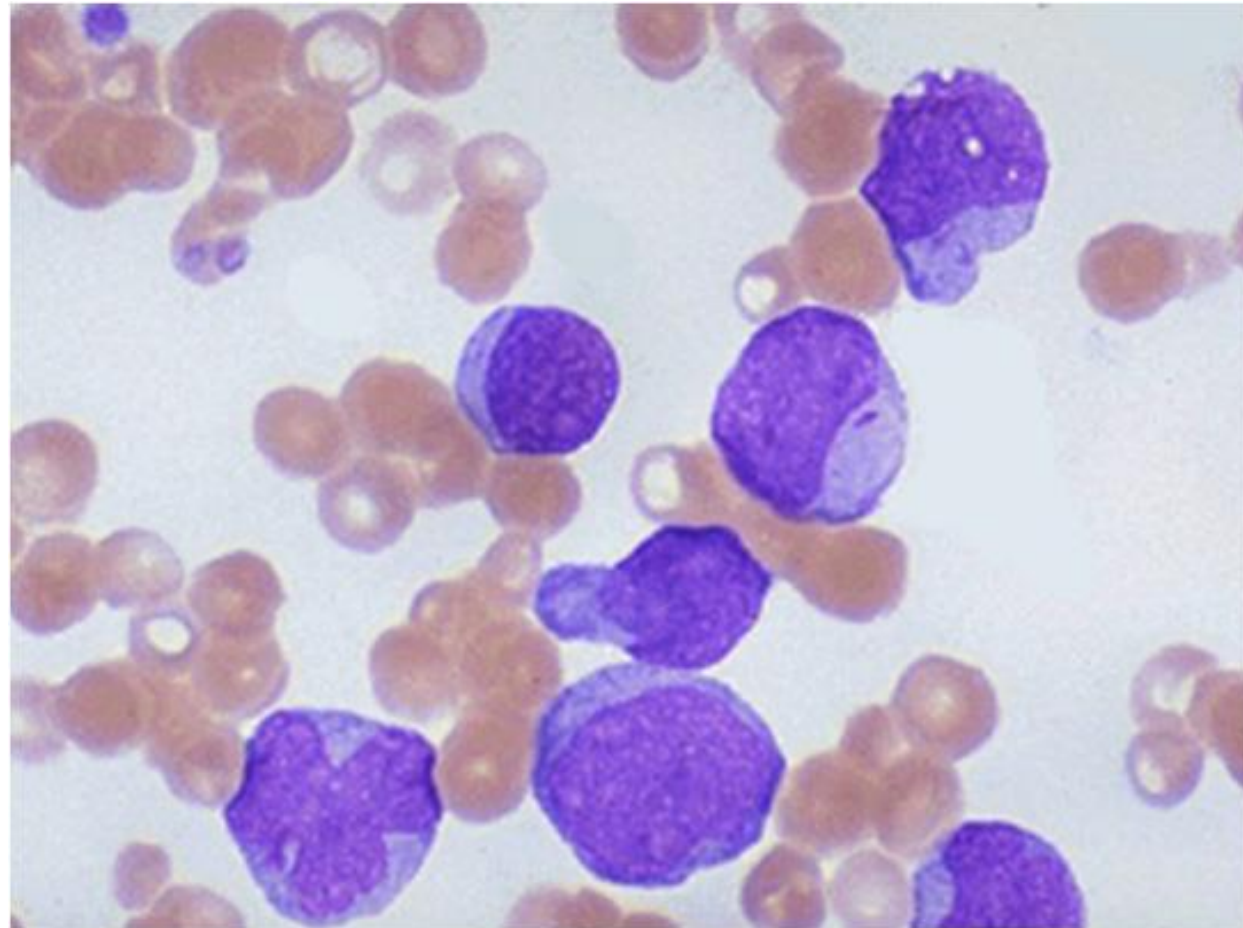
What are the differential diagnoses?

- B12/folate deficiency
- Liver disease
- Hypothyroidism
- Multiple myeloma
- Aplastic anaemia.

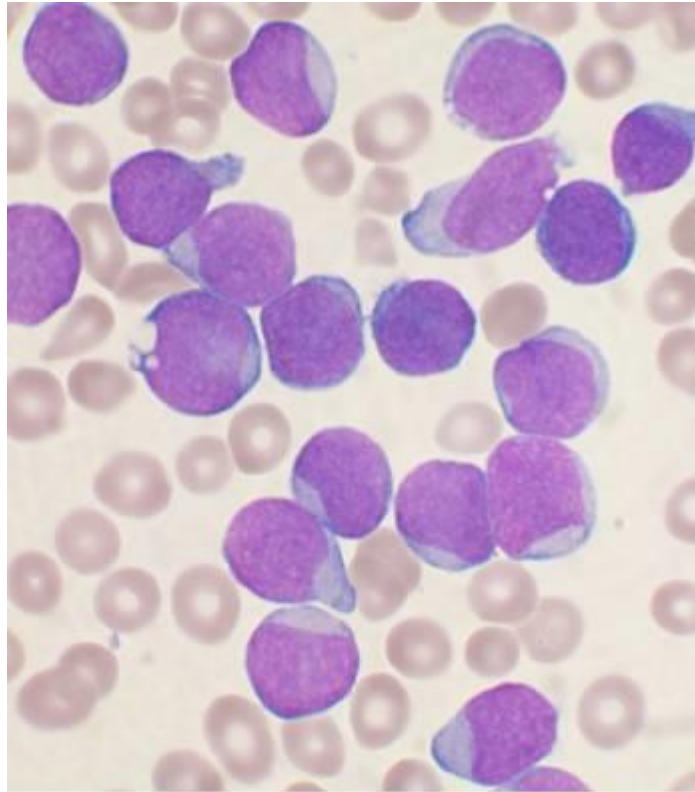
This is his blood picture.
What is the most likely diagnosis?



- 60 year old woman presented with tiredness. She had a breast cancer which was treated with chemotherapy 7 years back. Her BP is provided. What is the diagnosis?



- 2 year old child presented with petechiae all over the body. His BP is provided. What other tests would you request?



- a. Sudan black B
- b. PAS
- c. Flow cytometry
- d. Serum ferritin
- e. Cytogenetics