

S-B2

다발골수종 환자에서 유전분증에 의한 생존률의 악화

가톨릭의과대학 서울성모병원 신장내과

황선덕, 유지현, 박우영, 배명남, 정병하, 최범순, 양철우, 김용수, 박철휘

Amyloidosis Aggravates Patients' Survival in Multiple Myeloma

Seon Deok Hwang, Ji Hyun Yu, Woo-yeong Park, Myoung Nam Bae, Byung Ha Chung
Bum Soon Choi, Chul Woo Yang, Yong-Soo Kim, Cheol Whee Park

Division of Nephrology, Department of Internal Medicine, Seoul St. Mary

Background: Renal failure is a common complication of multiple myeloma and other plasma cell dyscrasias. The presence of coexistent kidney disease is considered to be associated with decreased survival rate. The aim of this study is to investigate the effect of presence of amyloidosis and renal failure on the survival rate of plasma cell disorders including multiple myeloma.

Methods: 285 patients diagnosed as plasma cell disorders from Dec. 2001 to Feb. 2013 were included in this study, among whom 126 patients (52.9%) comprised of male and the median age and GFR were 57.32 ± 9.563 years and 69.26 ± 33.72 mL/min/1.73m², respectively. Excluding 47 patients due to missing data, finally enrolled patients accounted for 238 who comprised of amyloid light chain (AL) amyloidosis (n=10), multiple myeloma (MM) with amyloidosis (n=11), MM without amyloidosis (n=212) and the others (n=5). Kaplan Meier survival curve was applied to compare the survival rates among these groups.

Result: Between the groups of AL amyloidosis and MM with amyloidosis, no significant difference was found with respect to baseline characteristics including age, sex, transplantation status, Hb, and MDRD-GFR. Kaplan Meier survival curve showed that AL amyloidosis group was associated with superior survival as compare to that of MM with amyloidosis group (p-value: 0.013). The presence of Amyloidosis was associated with inferior survival between MM groups (MM with amyloidosis mortality; 7/11 (63.6%) vs. MM without amyloidosis; 50/212 (23.6%), p<0.001). Moreover, 75 patients with renal failure showed lower survival rate as compared to that of 137 patients with non-renal failure in MM without amyloidosis (non renal failure mortality 25/137 (18.2%) vs. renal failure 25/75(33.3%), p=0.002).

Conclusions: In patients with plasma cell disorders, the prognosis of MM with amyloidosis was worse than that of AL amyloidosis and MM without amyloidosis. MM without amyloidosis and AL amyloidosis were not associated with the deterioration of kidney function. However, MM with amyloidosis was associated with decreased kidney function and furthermore, renal failure (GFR<60ml/min) at the time of diagnosis was shown to be an important prognostic factor in relation to its mortality.

Key Words: 유전분증, 다발골수종, 신부전

Amyloidosis, Multiple myeloma, Renal failure