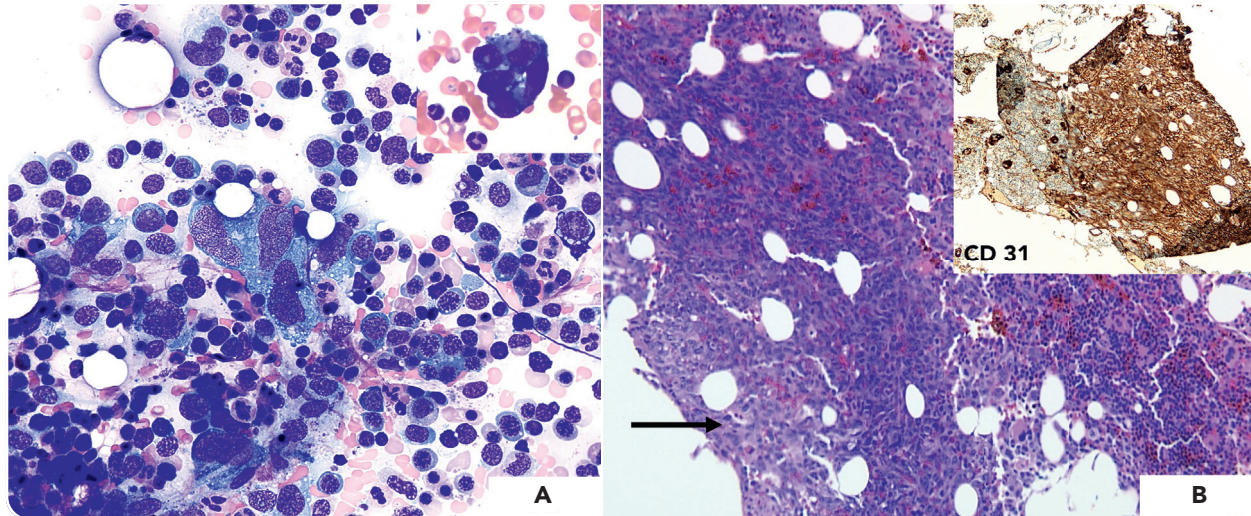


## Metastatic angiosarcoma in a bone marrow biopsy

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A 37-year-old man presented with bilateral deep vein thrombosis and a rapidly growing mass in the right lower extremity, which was diagnosed as angiosarcoma. He received 8 cycles of paclitaxel and targeted radiation. Six months from diagnosis, a metastasis to the left scapula was found. Three months later, he presented with numbness, fatigue, hematuria, and a rapid decrease in hemoglobin and platelet count. Laboratory evaluation included a hemoglobin concentration of 62 g/L, platelet count of  $6 \times 10^9/L$ , and a white blood cell count of  $14.1 \times 10^9/L$ . The peripheral blood smear showed a leukoerythroblastic blood picture. Bone marrow aspirate revealed clusters of large, pleomorphic epithelioid cells with vacuolated cytoplasm (panel A,

hematoxylin and eosin stain; original magnification  $\times 500$ ; inset, original magnification  $\times 400$ ) in a background of erythroid predominant trilineage hematopoiesis. The core biopsy examination revealed a hypercellular marrow replaced by sheets of highly pleomorphic epithelioid cells (panel B, hematoxylin and eosin stain; original magnification  $\times 400$ , arrow points to metastatic cells). The diagnosis was confirmed by positive staining for CD31 and CD34 (panel B, inset, original magnification  $\times 200$ ).

Metastatic sarcoma to the bone marrow is unusual. This case highlights a rare case of metastatic angiosarcoma involving the bone marrow as a cause for new-onset cytopenias.