

## **HEMATOLOGY CASE -1**

### **A Case of Fever With Pancytopenia**

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A 58-yr old male presented with 2 months history of easy fatigability, loss of appetite, weight loss and one week history of fever. On clinical examination he was pale, febrile and had massive hepatosplenomegaly. Rest of the systemic examination was normal. Initial evaluation revealed pancytopenia with reticulonodular opacities in bilateral lung fields on chest radiograph with low levels of vitamin B12. CECT and PET-CT imaging of the chest revealed military opacities with tree in bud opacities suggestive of infective pathology most likely pulmonary tuberculosis. Bone marrow biopsy was normal. He was started with category 1 ATT and Vitamin B12 and discharged, and on follow-up there was symptomatic improvement with regression of hepatosplenomegaly and improvement of blood counts. 6 weeks later he presented again with easy fatigability, without any fever. Evaluation revealed massive hepato - splenomegaly and pancytopenia. In view of hypersplenism diagnostic and therapeutic splenectomy was done after vaccinating for capsulated organisms. The final diagnosis was established after the histopathological examination of the resected spleen specimen.