A 73-year-old woman developed muscle enlargement, stiffness, and signs of congestive heart failure over 2 years (figure, A). Examination revealed proximal weakness and reduction of subcutaneous fat. Macroglossia was absent. Endocrinology was normal. Muscle biopsy showed amyloid deposition (figure, B), and a plasmacytoma with \(\lambda\) light chain paraprotein was revealed. Melphalan/prednisolone resulted in reduction of muscle bulk; however, death from cardiac failure occurred 12 months later (autopsy not performed).

Amyloid myopathy is a rare manifestation of systemic amyloidosis. Muscle enlargement (“pseudohypertrophy”) was reported in 7 to 44% of cases. Amyloid deposition in our patient was not extensive, suggesting that more specific effects of the paraprotein on regulation of muscle homeostasis might explain the unusual phenotype.

Gross muscle pseudohypertrophy in myeloma-associated light chain amyloidosis
Anja Windhagen, Johannes Bufler and Stefan Neudecker

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