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Amyloidosis: a monocentric experience

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Introduction

Amyloidosis is a rare disease with a pleomorphic clinical presentation. Cardiac involvement is an uncommon and nonspecific entity of this disorder. Although exceptional, the latter determines the prognosis of these patients.

The purpose of our study is to report cases of amyloidosis in our center and to determine their main characteristics.

It is about a retrospective descriptive study including all patients hospitalized in the University Hospital Mohamed Taher Maamouri at the department of Internal Medecine, Nabeul, Tunisia, between 2022 and 2024, and who are diagnosed with systemic amyloidosis.

Results

We collected data on 10 patients with systemic amyloidosis.

Sex ratio: 1
Median age: 69 years

Diagnostic confirmation methods:
- Fat pad biopsy + accessory salivary gland biopsy : 3 cases
- Renal biopsy: 1 case
- Duodenal biopsy: 1 case
- Bone scintigraphy: 1 case

Amyloidosis type:
- AL: 5 cases
- AA: 1 case
- ATTR: 1 case

Outcome:
- 3 deaths
- 2 lost to follow-up
- 5 patients alive at the time of data collection, including 4 with decompensated heart failure

Clinical presentation	Number of cases
Digestive (tumor-like)	1
Renal (lower limb edema and positive proteinuria)	1
Cardiac (heart failure syndrome)	8

Conclusion

The clinical presentation is often nonspecific, which can delay the diagnosis of these patients who are difficult to manage, with complex conditions and a disruptive course. The management of this disorder must be multidisciplinary and require prioritization and rapid investigations to ensure timely positive diagnosis of patients and better characterization of this amyloidosis to adequately treat these patients.

References

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