

Medical Image

Title: Chloroma of the Tongue in a Patient with Acute Myeloid Leukemia

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Figure 1: Fungating mass on the superior aspect of the lateral right tongue, covered by a creamy whitish-brown layer.

A 36-year-old female presented with a 2 week history of a tongue lesion causing significant discomfort. Initially, she was given Nystatin but her lesion continued to get worse prompting her to present to the hospital. She also reported of intermittent fever, night sweats, and abdominal pain. The physical examination revealed a large, firm, 2.5 cm by 3 cm fungating mass on the superior aspect of the lateral right tongue, covered by a creamy whitish-brown layer (Figure 1). She also had enlarged, 2 cm non-tender, non-mobile, and non-erythematous anterior cervical lymph nodes. She was found to be pancytopenic, febrile and hypotensive in the Emergency Department and was therefore admitted. Extensive workup revealed that her pancytopenia and her tongue lesion were due to the underlying chloroma co-occurring with acute myeloid leukemia. Chloroma is a rare solid tumor composed of myeloblasts. It usually occurs in association with acute myeloid leukemia but can also co-occur with other myeloid disorders.