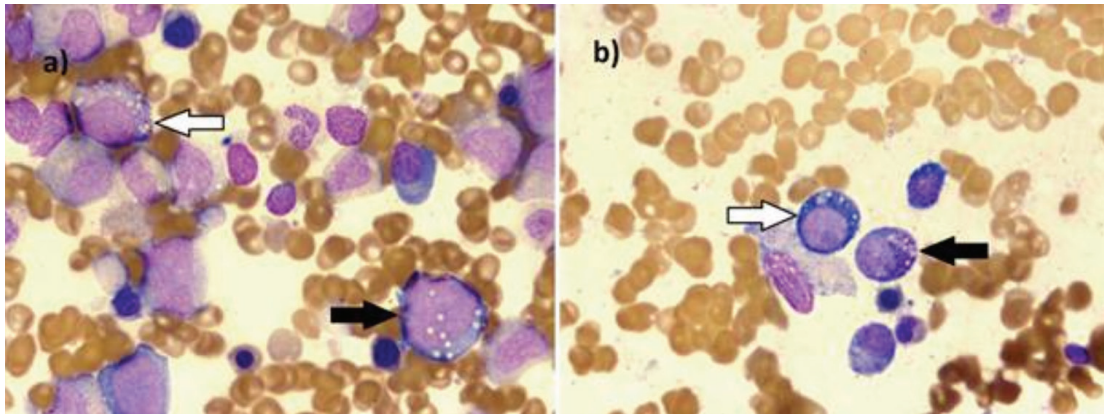


## Vacuolization in Myeloid and Erythroid Precursors in a Child with Menkes Disease

### Menkes Hastalıklı Bir Çocukta Myeloid ve Eritroid Öncüllerde Vaküolizasyon

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**Figure 1.** Bone marrow aspiration smears: a) cytoplasmic vacuolization in myeloid precursors (white arrow) and erythroid precursors (black arrow); b) cytoplasmic vacuolization in myeloid precursors (black arrow) and erythroid precursors (white arrow). May-Grünwald Giemsa stain, original magnification 100 $\times$ .

A 5-year-old boy who was in follow-up with a clinical and biochemical diagnosis of Menkes disease (MD) since 10 months of age was admitted with diarrhea. On examination he had a characteristic cherubic face, hypopigmented and sparse hair, hepatosplenomegaly, and hypotonia with brisk deep tendon reflexes. A complete blood count revealed the following: hemoglobin, 5.5 g/dL; hematocrit, 16.2%; red blood cells,  $1.69 \times 10^{12}/L$ ; mean corpuscular volume, 95.8 fL; mean corpuscular hemoglobin, 32.3 pg; red blood cell distribution width, 19.2%; white blood cells,  $2.2 \times 10^9/L$ ; and platelet count,  $157 \times 10^9/L$ . Serum vitamin B12 level was 575 pg/mL. Serum copper level was 81  $\mu\text{g}/\text{dL}$  and serum zinc level was 152  $\mu\text{g}/\text{dL}$ . Peripheral blood smear revealed 34% polymorphonuclear leukocytes, 62% lymphocytes, and 4% monocytes. Bone marrow examination revealed normocellular marrow with megaloblastic

changes and widespread cytoplasmic vacuolization in myeloid and erythroid progenitors (Figure 1).

Menkes disease is a neurodegenerative disorder due to mutations in the *ATP7A* gene, which ends with deficiency of copper-dependent enzymes [1].

Cytoplasmic vacuoles of myeloid and erythroid lineages have been described in patients with copper deficiency [2], Pearson syndrome [3], and acute alcoholic intoxication [4]. There have also been reports of megaloblastic changes in copper deficiency [2]. Herein, we exhibited both erythroid and myeloid vacuolizations and severe megaloblastic changes together in a patient with MD. All of these morphological findings in our patient were attributed to copper deficiency.

**Keywords:** Menkes disease, Copper deficiency, Vacuolization, Bone marrow

**Anahtar Sözcükler:** Menkes hastalığı, Bakır eksikliği, Vaküolizasyon, Kemik iliği

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## References

1. Kaler SG, Holmes CS, Goldstein DS, Tang J, Godwin SC, Donsante A, Liew CJ, Sato S, Patronas N. Neonatal diagnosis and treatment of Menkes disease. *N Engl J Med* 2008;358:605-614.
2. Tamura H, Hirose S, Watanabe O, Arai K, Murakawa M, Matsumura O, Isoda K. Anemia and neutropenia due to copper deficiency in enteral nutrition. *JPEN J Parenter Enteral Nutr* 1994;18:185-189.
3. Topaloğlu R, Lebre AS, Demirkaya E, Kuşkonmaz B, Coşkun T, Orhan D, Gürgey A, Gümrük F. Two new cases with Pearson syndrome and review of Hacettepe experience. *Turk J Pediatr* 2008;50:572-576.
4. Yeung KY, Klug PP, Lessin LS. Alcohol-induced vacuolization in bone marrow cells: ultrastructure and mechanism of formation. *Blood Cells* 1988;13:487-502.