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Clinical Image **Published Date:- 2021-07-27**

Malignancy induced haemophagocytosis of leukaemic blasts by macrophages and transformation into a multinucleated giant cells

Haemophagocytosis is a dysregulated immune condition characterised by both inflammation and uncontrolled activation of macrophages and T-cells, which causes aberrant cytokine release, leading to cytokine storm [1] it can be primary or secondary, depending upon the etiology.

Clinical Image **Published Date:- 2021-07-21**

Atypical cutaneous relapse of multiple myeloma

A 66-year-old patient, diagnosed ? light chains MM with t(11;14), presented before second cycle with bendamustine-dexamethasone. A complete remission was initially obtained with bortezomib-cyclophosphamide-dexamethasone and autologous HSCT. After relapse, he was successively treated with bortezomib-dexamethasone, carfilzomib-dexamethasone, daratumumab-dexamethasone and benda-mustine-dexamethasone.

Clinical Image **Published Date:- 2021-07-20**

COVID-19 Associated acute limb ischemia

A 78-year-old man, known case of, diabetes mellitus, and hypertension presented with fever, dry cough and dyspnea of five-day duration. He tested positive for SARS-CoV-2 infection and was admitted to the intensive care unit as a case of severe COVID -19 pneumonia. Evaluation revealed raised inflammatory markers CRP: 92.2 mg/ml, LDH: 556 IU/L, Ferritin: 286 ng/ml, D-dimer: 3716 ng/ml. On day 9 of illness, he developed numbness, pain and discoloration of right hand.

Clinical Image **Published Date:- 2021-04-16**

Total aortic occlusion associated with SARS-CoV-2 (COVID-19) infection: Video Image

Acute pulmonary damage and vascular coagulopathy appear to be frequent in patients with SARS-CoV-2 infection relation to corona-virus. The inflammatory process accompanying the infection and excessive coagulation state is one of the most important causes of patient loss.

Clinical Image **Published Date:- 2021-03-18**

Ketamine-related uropathy and cholangiopathy

23-year-old man had a 2-year history of ketamine abuse and presented intermittent abdominal pain, urinary urgency and dysuria for one year. Two weeks ago, laboratory analysis showed within normal limits. This time, he visited our emergency department due to hematuria and bilateral flank pain. CT scan and MRI revealed bilateral hydronephrosis, hydroureter, irregular thickened wall of urinary bladder, and fusiform common bile duct with distal stenosis

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Clinical Image **Published Date:- 2021-03-18**

Aortic dissection complicating carotid dissection and myocardial infarction

A 58-year-old hypertensive man presented to our insti-tution with acute chest pain and dizziness. Electrocardiogram revealed inferior wall myocardial infarction with suspected right ventricular involvement (Figure 1A). Computed tomographic aortography (CTA) depicted ascending aortic dissection (AAD) with involvement of bilateral carotid, subclavian, and right common iliac arteries (Figure 1B). Replacements of aortic valve and ascending aorta with CABG (Ao-RSVG1-LAD and Ao-RSVG2-RCA) were conducted.

Clinical Image **Published Date:- 2021-03-09**

Millian´s ear sign: Bilateral ear erythema

A 79 years old woman presented with one-day history of pain, redness, pain and swelling without discharge in her left ear, later her right ear started with the same symptoms as in her contralateral ear spreading around the scalp and the forehead (Figure 1), she denied fever, or other constitutional symptoms.
