

# The Underdiagnosis of Cryoglobulinemias, a potentially big Problem at the long term

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## Abstract

**Purpose:** To evaluate the prevalence of cryoglobulinemias, as well as its comorbidities and etiology. Autoimmune diseases could very well be referred to as a spectrum too, being that in most cases you find some form of other autoimmune disease overlapped. But what about cryoglobulinemia? Could this disease go very much undiagnosed, despite suspecting an autoimmune disorder? Cryoglobulins are immunoglobulins that precipitate at temperatures below 37°C. They usually redissolve upon rewarming. Clinically, it usually presents with purpura (a purplish discoloration from bleeding under the skin.) It also usually presents with severe joint pain and muscle pain (something known as Metzler's Triad). The problem is that sometimes these immunoglobulins attach together and form immune complexes, which compromise blood flow and can hurt certain organs such as the kidneys and the liver. But are we including the look for cryoglobulins when we think about an autoimmune disorder? It has always been known to be connected to either the hepatitis C virus or to Waldenström's Macroglobulinemia. **Methods:** To analyze eight cases I diagnosed and treated. Of the eight cases I diagnosed and treated, none of them were related to either one, but two of them were related to MS and one to Sjögren's disease. The last one posed no problems as to what treatment to give, which is pretty much the same for both pathologies. The 2 cases related to MS did, as I had to stop the treatment they were on (dimethyl fumarate and fingolimod) and start them on rituximab. Once finished, restart them on their regular MS drugs. One of the patients refused treatment and eventually developed renal failure. **Results:** But the problem in my opinion isn't just the misdiagnosis, as important as this is. The much bigger problem would be that once again, as I've documented in other autoimmune disorders, the starting point would be the hyperreaction towards the Epstein Barr virus. All eight cases presented very high levels of Ig G against EBV. Cryoglobulinemias can appear in different ways, one of them being Mixed cryoglobulinemia, a systemic small-vessel vasculitis. B cell expansion is the biological substrate of the disease. This pathology may eventually evolve into lymphoma. Let's remember that what the EBV does is immortalize B cells. **Conclusions:** So to the problem of underdiagnosis, we must add the same pathogen as the origin. I believe the true challenge for science regarding autoimmune disorders is to somehow make this overreaction against EBV not possible, taking into account that most people in the world have been and will continue to be exposed to it.

## Biography

Dr Melchor Rodrigo (MD) he is Professor of Neurology, Buenos Aires, Argentina