Refactory acute monoblastic leukaemia with low hypodiploidy

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Fig. 1 Peripheral blood microscopy demonstrated monoblasts (MGG stain, ×100)

A 9-month-old boy presented with 1-week history of fever and pallor. He had unremarkable birth history and appropriate developmental milestones. Clinical assessment at presentation indicated a pale and normal looking child with generalised lymphadenopathy, hepatosplenomegaly, and generalised skin rash resembling chloroma. Blood counts showed severe anaemia and thrombocytopenia (Hb 45 g/l, WBC 7.7 × 10^9/l, platelets 37 × 10^9/l). Bone marrow and peripheral blood microscopy demonstrated blasts with indented nuclei and basophilic, agranular cytoplasm

Fig. 2 Bone marrow smear showing blasts staining positive for nonspecific esterase (×100)

Fig. 3 The marrow blasts demonstrated negative staining for myeloperoxidase (×100)

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