

**Case Report**
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## Splenic Rupture Secondary to Amyloidosis: A Rare Case Report

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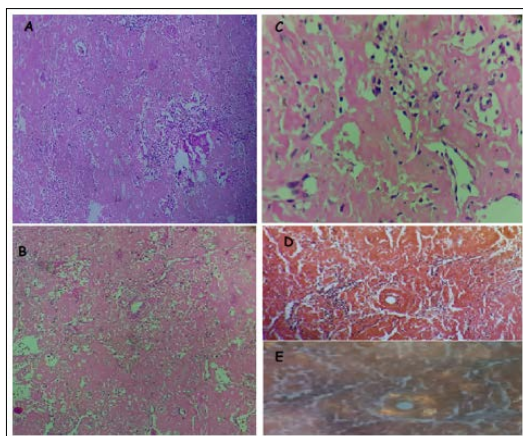
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**Introduction**

Amyloidosis is a group of diseases in which abnormal proteins, known as amyloid fibrils, build up in tissue. Splenic rupture secondary to amyloidosis is an extremely rare complication. While amyloidosis may be systemic or localized, splenic involvement is fairly common (5–10%) and generally asymptomatic. When splenic rupture secondary to localized amyloidosis occurs, it is usually the first manifestation of the disease process. Herein, we report a case of a 57-year-old female who presented a rare case of spontaneous splenic rupture due to localized amyloidosis as an important consideration in the differential of acute abdominal pain.

**Case Report**

We report a new case, of 57 years old women, consulted for abdominal pain. The CT scan showing a large subcapsular splenic hematoma. Histological examination revealed the splenic parenchyma showing the presence of areas of necrosis and infarction, hemorrhage, inflammation, granulation tissue, and deposits of eosinophilic amorphous material were appreciated. The Congo red stain and the birefringent under polarized light of amyloid deposits confirm the diagnosis of splenic amyloidosis [1-3].


**Conclusion**

In conclusion, splenic rupture secondary to amyloidosis is a rare but potentially life-threatening complication that requires prompt recognition and management. Close collaboration

among healthcare providers, including hematologists, surgeons, and pathologist, is essential for ensuring timely diagnosis and treatment.

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