

Abstract

Chronic myeloid leukemia (CML) is a rare myeloproliferative neoplasm associated with Philadelphia chromosome t (9;22) (q34; q11) resulting in BCR-ABL fusion gene which leads to production of a unique protein with tyrosine kinase activity. Deregulated tyrosine kinase activity is thought to be the reason for the development of chronic myeloid leukemia, and it has become the primary therapeutic target.

CML can present in various phase; chronic, accelerated or blast crisis. Blast crisis can involve lymph nodes, skin, spleen, central nervous system or bone marrow. Isolated central nervous system blast crisis is a rare manifestation and even rarer to present as the first presentation.

This case report describes a previously healthy patient with a background of constitutional symptoms for a month presenting with multiple cranial nerve palsies and cerebellar signs, MRI brain features mimicking possible metastasis with hemorrhagic transformation diagnosed to be having CML with CNS blast crisis successfully treated with tyrosine kinase inhibitors.

It is paramount that the clinicians are aware of this unique presentation as CML with recent advances in medicine remains a treatable condition.