

**Title: An Interesting Presentation of Sarcoidosis****Author(s): Bryan Margaria, Ashrithpal Police Reddy****Affiliation: MetroHealth**

Sarcoidosis is a systemic inflammatory disease characterized by an immune response leading to the formation of granulomas. This disease is considered quite distinct from Multiple Myeloma (MM), a cancer of plasma cells, which are clonal B cells that release antibodies that target specific tissues or cell types. This case is an interesting presentation of a 64-year-old Caucasian male (recently diagnosed with prostate cancer) presenting to an academic hospital with headaches, leg restlessness, and a 25-pound weight loss as well as hypercalcemia discovered on screening labs. Upon admission to the hospital, the patient in question was found to have hypercalcemia, anemia, and acute renal failure, symptoms suggestive of MM. Further workup revealed an equivocal SPEP/UPEP, with MM being considered the most likely diagnosis at this time. Additionally, vitamin D levels in this patient were low and PTH/PTH-rh were low/normal. However, a CT of the abdomen/pelvis revealed an incidental finding of hilar lymphadenopathy suggestive of Sarcoidosis. The patient later had a biopsy confirming the diagnosis and the patient had an excellent response to steroids. This case is unique as the low levels of Vitamin D and PTH-rh would suggest other diagnoses, and the patient had no lung symptoms suggestive of sarcoidosis. An important lesson from this lesson is to always have a broad differential when considering patient presentations, as “classic” illnesses can have atypical presentations.