

## CHRONIC LYMPHOCYTIC LEUKAEMIA AND LOW GRADE LYMPHO-PROLIFERATIVE DISORDERS – DISCHARGE ADVICE FOR GPs

### Monitor FBC annually

### Reasons to re-refer:

- Lymphocyte count rising rapidly (typically doubling within 6 months)
- Lymphocyte count rising above  $100 \times 10^9/l$
- Developing a significant cytopenia (for instance):
  - Hb dropping below 10 g/dl
  - Neutrophils below  $1.5 \times 10^9/l$
  - Platelets  $< 80 \times 10^9/l$
- Developing significant 'B' symptoms
  - Weight loss unexplained (Greater than 3kg in 3 months)
  - Drenching night sweats
  - PUO (documented)
  - Recurrent infections
- Clinical Examination:
  - Lymph nodes alone or in groups ( $>5$  cm diam)
  - Developing "bulky" disease:
    - Spleen  $> 16$  cm (on Ultrasound) or  $> 4$  cm below left costal margin
    - Note: If spleen is impalpable clinically, then it is less than 16 cm diameter and ultrasound is not normally required to measure it.*
    - Lymph nodes alone or in groups  $> 5$  cm diameter or  $> 3$  nodal sites with diameter  $>3$ cm.
    - Bone lesions
    - Renal impairment
    - Pleural effusion if new
    - Hepatomegaly/Jaundice

### General Advice:

- No specific dietary advice required.
- Avoid unnecessary exposure to infection/crowded places.
- Treat infections promptly – with a full course of antibiotics.
- Watch out for early signs of Shingles; treat with high dose oral acyclovir at the first sign
- Administer all usual vaccines (Flu Pneumovax etc.)