

Chronic Lymphocytic Leukemia

Chronic Lymphocytic Leukemia (CLL) is a type of blood cancer that originates from lymphocytes, a type of white blood cell in the blood. It is a common form of blood cancer, accounting for approximately 25% of all blood cancers, and typically occurs in people over the age of 50. Despite ongoing research, the exact cause of CLL remains unknown.

In many cases, patients with CLL may not have any symptoms. However, in advanced stages, anemia can develop as the disease involves the bone marrow, causing a slowdown in blood production. Some patients may experience symptoms such as weight loss, excessive fatigue, night sweats, fever, and enlarged lymph nodes or spleen.

CLL is often suspected when a routine blood test reveals a high number of lymphocytes. A confirmatory test called Flow Cytometry is done to diagnose CLL. If the patient is asymptomatic, further testing or treatment may not be necessary. Instead, regular check-ups and blood tests every three months are conducted to assess the need for treatment.

Treatment for CLL may be required in the following situations:

1. Presence of symptoms like fever, weight loss, fatigue, etc.
2. Difficulty in swallowing or breathing due to enlarged lymph nodes.
3. Enlargement of the spleen beyond a certain size.

4. When blood volume is less than 10gm and platelet count is less than one lakh due to bone marrow involvement.
5. If the number of lymphocytes doubles in less than six months.
6. If there is organ damage due to recurrent infections or CLL.

If treatment is indicated, before starting treatment, bone marrow test, FISH test, sequencing test of TP-53 gene, ECHO, and other tests are performed. If the 17p chromosomal defect or TP-53 gene mutation is present, Ibrutinib tablet is prescribed. In cases without these problems, usually 6 cycles of Bendamustine chemotherapy with Rituximab are administered, with each cycle being given every 28 days. Two months after completing the treatment, blood tests are conducted to evaluate its effectiveness. If Ibrutinib is prescribed, it may have to be continued for an extended period.

It is important for CLL patients to undergo regular follow-ups with their doctor as there is no cure for CLL, and the disease can recur. Additional chemotherapy treatments may be given if the disease returns.

Rituximab-Bendamustine chemotherapy treatment has no significant side effects other than a decrease in the number of various blood cells, and notably, it does not cause hair loss.

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While no special diet is required during treatment, it is recommended to consume cooked food. If any symptoms of fever, cough, etc., are experienced, prompt medical attention should be sought. Patients should prioritize personal cleanliness. They should be cautious about medications' potential adverse effects on the developing fetus. Therefore, avoiding pregnancy is crucial.

CLL is not a hereditary disease and is not transmitted from one person to another. Ongoing research is exploring new drugs for CLL treatment through Clinical Trials. Patients may consider participating in these trials if they have the opportunity.

If there is any other information needed about CLL disease, patients are encouraged to consult their doctor without hesitation to address any doubts or concerns.

Dr. Girish Kamat MD, DNB (Hematology)

Professor,
Department of Hematology,
SDM College of Medical Sciences and Hospital,
Sri Dharmasthala Manjunatheshwara University,
Dharwad- 580008

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