

Myeloma is a difficult cancer to diagnose due to the vagueness of symptoms and rarity of the disease. This is a tool designed to assist GPs and other healthcare professionals in recognising myeloma.

SUSPECT MYELOMA?

Myeloma red flags

Unexplained symptoms and/or more than one symptom:

- **Bone/back pain** – usually presents as unexplained pain, generalised or localised
- **Generally unwell** – fatigue, weight loss, suspicion of underlying cancer
- **Recurrent infections**
- **Unexplained anaemia**
- **Spontaneous fractures** including osteoporotic vertebral fractures
- **Unexplained breathlessness**

CRAB denotes four features of myeloma

- **Calcium raised**
- **Renal impairment/failure**
- **Anaemia**
- **Bone disease**



THINK MYELOMA!

If you suspect myeloma, request the following:

2. Serum protein measurement

- **Serum protein electrophoresis** to check for the presence of paraprotein
- **Serum free light chain (sFLC) assay** – if unavailable, **urine Bence Jones protein (BJP) test**
- **Serum immunoglobulins (IgG, IgA, and IgM)**

1. Full blood count and blood chemistry

- **FBC:** look for unexplained anaemia
- **ESR:** usually elevated
- **U&Es:** check for renal impairment



Contact/refer to the haematology clinic if the investigations show abnormal results, or in cases of unresolving presenting symptoms.

Check the NICE suspected cancer referral guidelines (www.nice.org.uk/guidance/ng12)



DIAGNOSE MYELOMA

Requires treatment



FURTHER TESTS (haematology clinic)



Including imaging and biopsy



OTHER RELATED CONDITIONS

Monoclonal gammopathy of undetermined significance (MGUS)

No treatment – monitor

Progression to myeloma:

1% per year

Smouldering myeloma

No treatment – monitor

Progression to myeloma:

10% per year

Early diagnosis via GP referral is associated with improved overall survival

myeloma.org.uk/mdp