

Waldenström Macroglobulinemia (WM)

Overview:

- WM is a blood cancer involving the B-cells (lymphocytes), where there is a malignant change to the B-cell in the late stages of maturing, and it continues to proliferate into a clone of identical cells
- Occurs primarily in the bone marrow but can also be found in the lymph nodes and other tissues of the lymphatic system
- WM is generally considered an indolent (slow growing) lymphoma although it can become aggressive in rare cases
- WM is the most common type of lymphoplasmacytic lymphoma



SIGNS AND SYMPTOMS

- B-symptoms – fever, night sweats, enlarged lymph nodes, unexplained weight loss
- Fatigue
- Numbness and tingling in the hands and feet
- Enlarged spleen
- Shortness of breath
- Easy bleeding or bruising
- Blurred vision



PSYCHOLOGICAL EFFECTS

- Anxiety related to diagnosis and treatment
- Fear of recurrence or progression of the WM
- Depression due to emotional and physical burden
- Social isolation
- Loss of self-esteem



Key Stats

- WM is classified as an indolent lymphoma and currently considered 'incurable' although long-term remissions are possible
- Family history of WM may be considered a risk factor
- WM most commonly occurs in older adult males with 70 years being the average age of diagnosis

Treatment Challenges

- Based on symptoms immediate treatment may not be needed with patients being actively monitored by their healthcare team ('watch and wait')
- When needed, first line treatment typically consists of chemoimmunotherapy
- Due to higher rates of recurrence, many patients require multiple lines of treatment throughout their lives.
- Access to targeted therapies (ex. BTK inhibitors) to treat relapsed/refractory WM varies across countries and regions

Clinical Trials

- [Database link](#)

Last update

- December 2024