

Suggestion: Read the chapter "Blood" and "Multiple Myeloma" prior to reading this.

WALDENSTROM'S MACROGLOBULINEMIA

This disease, like multiple myeloma, is also a monoclonal gammopathy. The abnormal globulin is a large gammaglobulin called IgM. The "M" is a so-called macroglobulin that means that it is about five times the size of other immunoglobulins.

The disease is chemically and biologically related to multiple myeloma but is much different in other respects. In multiple myeloma there is usually a great deal of bone disease, but in Waldenstrom's the bones may be normal - without fractures or pain. In Waldenstrom's the liver and spleen are often enlarged, but the kidneys may not be affected as they are in multiple myeloma. Perhaps the most difficult aspect of this disease is that there may be excessive clotting of blood, leading to strokes and clots in important arteries and veins. People with monoclonal protein diseases can have problems with their peripheral nerves. This is more common in macroglobulinemia than in myeloma.

There is no known cure. Some people may live many years without difficulty while others may require treatment to reduce the size of the liver and spleen or to prevent excessive clotting. In urgent situations the blood may be run through a machine with a filter (plasmapheresis) to remove the macroglobulin to prevent strokes and other blood clots. Chemotherapy to suppress the abnormal lymphocytes and plasma cells may be given and in this way keep the macroglobulin at a lower level and reduce the size of the liver and spleen if they are bothering the patient. In recent years, Fludarabine (a form of chemotherapy) has proven effective in this disease, and Rituxan® (a monoclonal antibody) is being tried in some patients.

Although Waldenstrom's is a malignancy, it may be very indolent and not cause problems for many years.