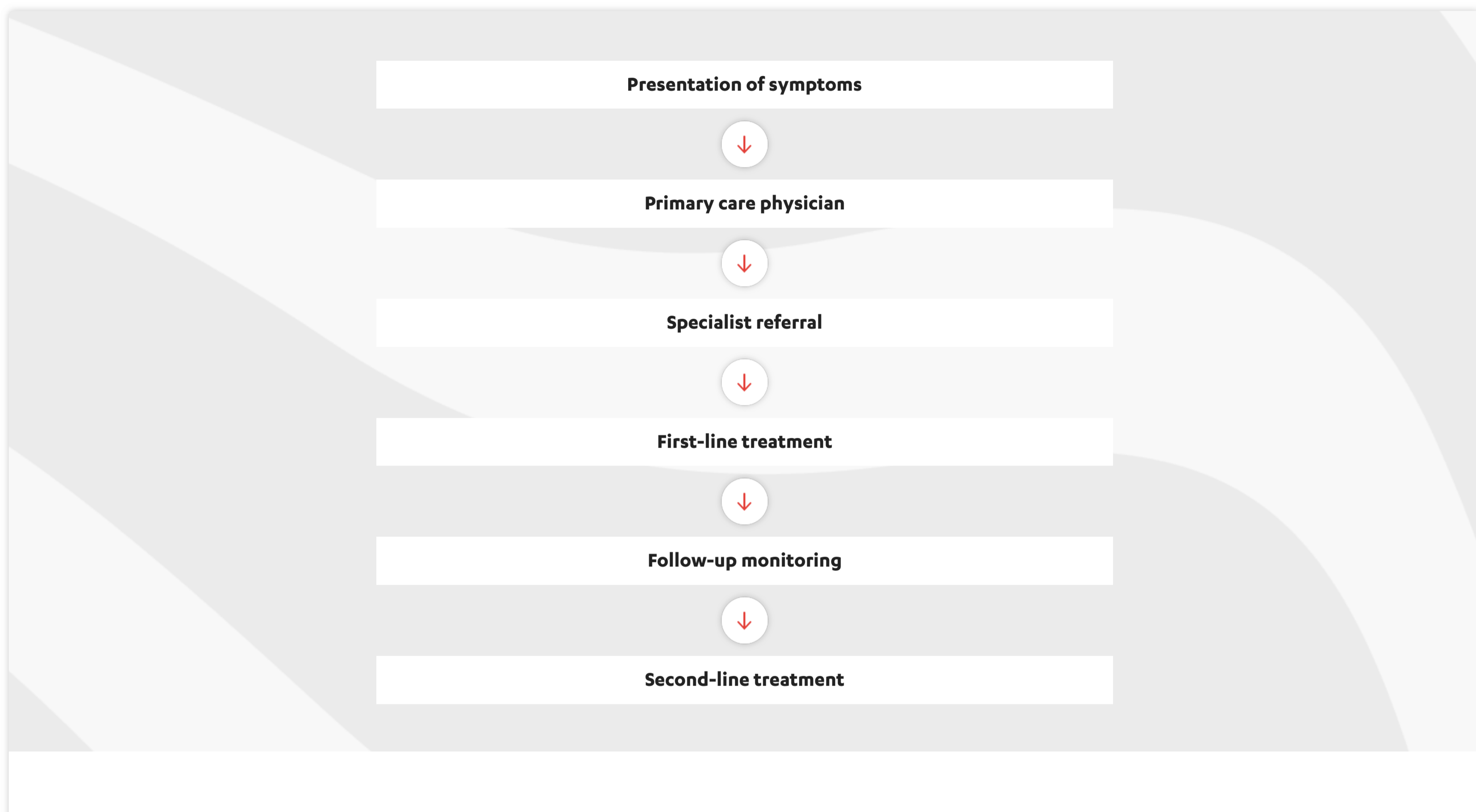


Discussing WM with your patients

Talking through WM treatment options with your patient is as important as choosing the regimen.

Patient pathway

This is an overview of the patient pathway, from symptoms to potential treatments, which may be helpful for your patients who want to know what their journey may look like.



Patient discussions

The nature of WM means it is currently incurable but presents as a chronic disease rather than as an aggressive malignancy.^{1,3} Treatment primarily focuses on symptom relief.^{1,4} Patients aged <70 years can survive for a median of 10 years, which reduces to approximately 4 years in patients aged >80 years.^{1,3}

Many patients may not have even heard of WM, and a diagnosis may come as a shock. They may expect treatment to start right away and not understand the need for a watch and wait strategy.

It is important to explain to them that waiting until they become symptomatic is appropriate and can maintain their quality of life and limit exposure to chemotherapy and its potential side effects, without a negative impact on treatment response or prognosis.^{3,4}

Symptomatic WM has a range of treatment options, dependent on tumour burden and the overall fitness of the patient, and can be given orally, intravenously, subcutaneously or a combination.^{1,2} Patient-related factors, quality of life in particular, are an integral part of any WM treatment strategy.

Engaging patients in their medical care is an important consideration in the treatment of WM. It is well understood that involving patients in treatment decisions can improve the overall treatment experience.⁵

Condition management

It is important for WM patients to focus on a healthy lifestyle throughout and after treatment. Making positive changes can help their body recover and improve overall well-being and health.⁶ These may include:⁷

- Stopping smoking
- Being more active
- Eating healthily
- Limiting alcohol intake
- Attending health and well-being clinics
- Reducing stress

WM=Waldenström's macroglobulinemia.

This site has been developed by Janssen-Cilag International NV. Janssen-Cilag International NV is the responsible editor of this document.

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