

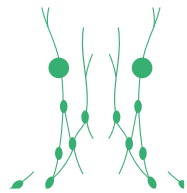
Follicular Lymphoma (FL)

Material for healthcare professional –
patient conversation

What is Follicular Lymphoma (FL)?

FL is the most common indolent (slowly growing) lymphoma

Organs involved



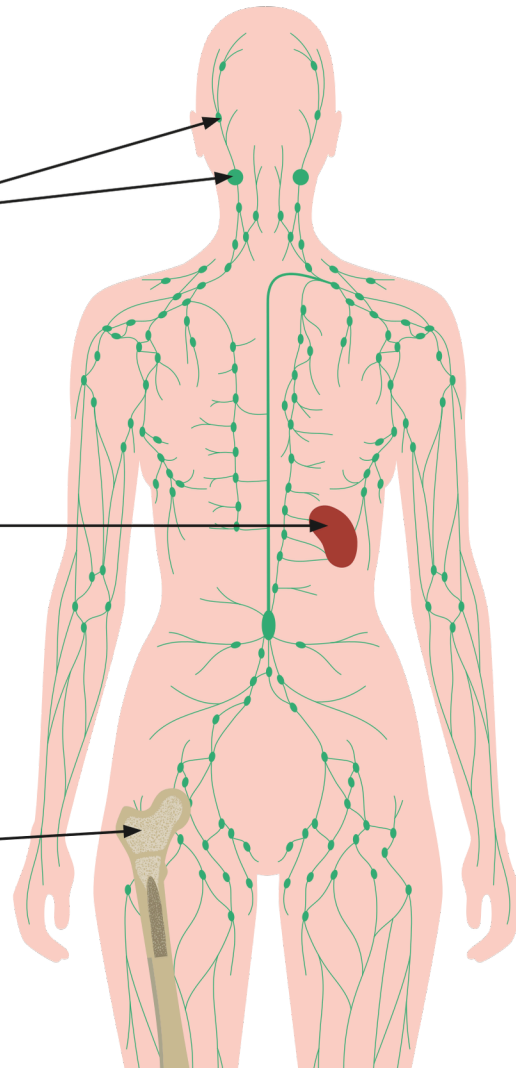
■ Lymph nodes



■ Spleen



■ Bone marrow



Rare disease:

In Switzerland, approx. 500 people are diagnosed with it each year.



Women are more commonly affected than men.

60
Years

Median age at diagnosis is 60 years.

10
Years

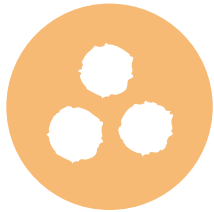
FL is characterized by a relapsing and remitting disease course, generally with a long median survival (10y - 80%).

3%

About 3 % of people with FL per year can develop diffuse large B-cell lymphoma (DLBCL).

Diagnosis

Workup prior to treatment



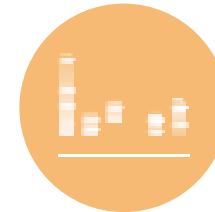
Differential blood count, reticulocytes (not yet matured erythrocytes)



ESR (erythrocyte sedimentation rate)



Total protein, electrophoresis light chain



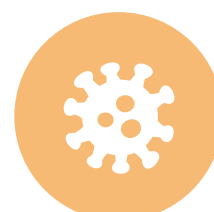
Immunofixation electrophoresis (blood serum and urine)



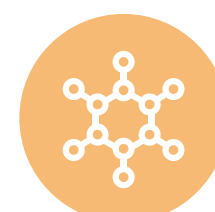
Free kappa and lambda light chains in the blood serum



Creatinine, uric acid, blood glucose



Serology: HBV (hepatitis B virus), HCV (hepatitis C virus), HIV (human immunodeficiency virus)



LDH (lactate dehydrogenase), β 2-microglobulin (optional)



Molecular genetics



CT or PET-CT

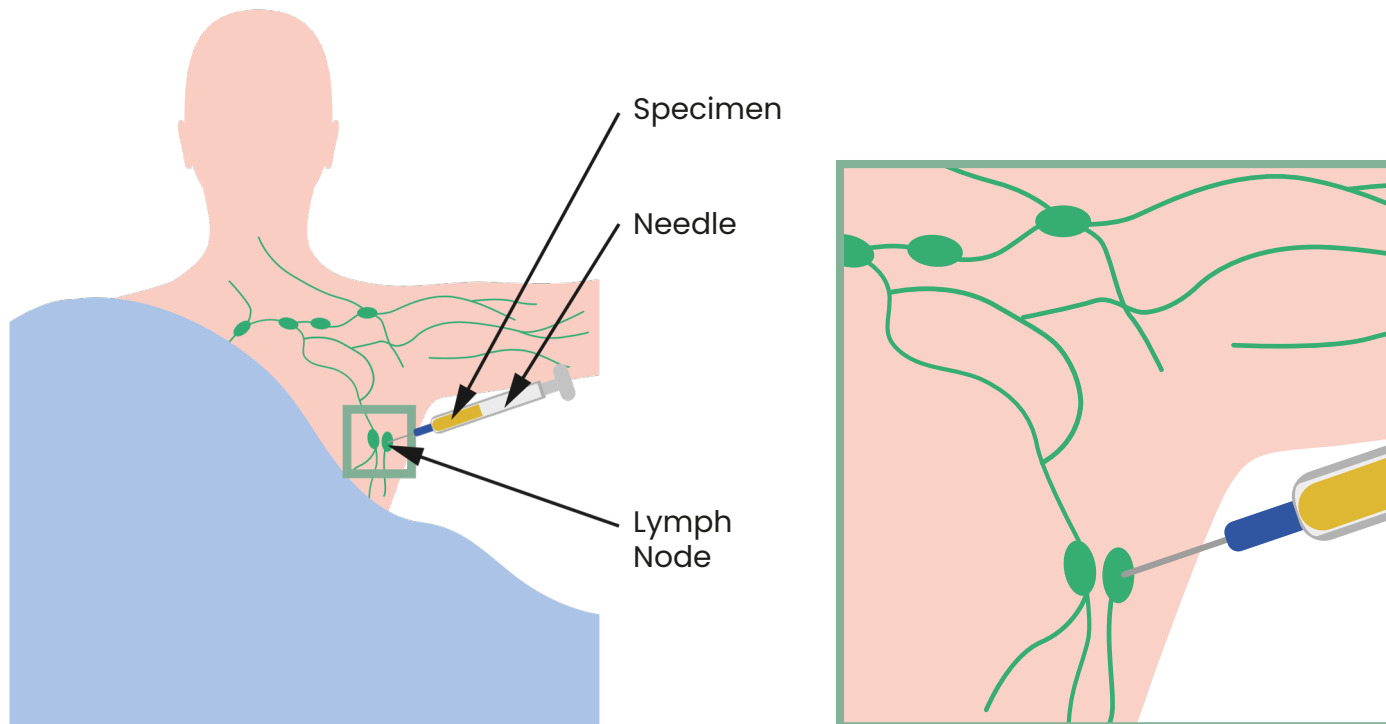


Bone marrow biopsy, only in some patients if needed

Diagnosis

Lymph node biopsy

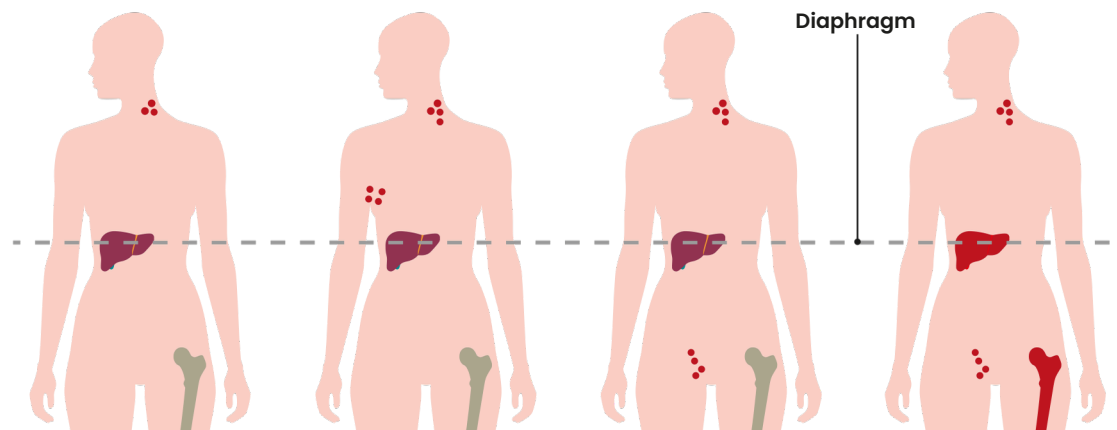
The physician administers a local anesthetic and then takes whenever possible one whole lymph node, and if the lymph nodes are difficult to access, a large lymph node biopsy can be performed as an alternative. The extracted material is examined microscopically.



Diagnosis

Genetics: in about 90% of the cases the BCL-2 gene is overexpressed as a result of a translocation between chromosome 14 and 18. This results in the inhibition of cell death.

Follicular lymphoma stages range from I to IV:



	Stage I	Stage II	Stage III	Stage IV
Criteria	Cancer in one lymph node region	Cancer in two or more lymph node regions on the same side of the diaphragm	Cancer in lymph nodes on both sides of your diaphragm	Cancer has spread outside of the lymph nodes to bone marrow and/or organ systems
% of all FL cases at diagnosis*	25%	15%	26%	27%

* 7% unknown/unstaged

FLIP-Index, FLIPI

Low risk	Intermediate risk	High risk
0 -1	2	3 or more

Risk factors (1 factor = 1 point) being:

- More than 4 affected lymph node regions
- LDH increase
- Age more than 60 years
- Stage III or IV
- Hemoglobin lower than 12g/dl

According to how cells look under the microscopes FL can be classified into grades 1 to 3 (3A, 3B). This classification system is continuously being updated and can be subjected to change in the future.

Symptoms

Depending on the position of the affected lymph node, the symptoms can be heterogeneous.

**No
symptom**



**Weakness,
Fatigue**



Infections



**Painless swelling of
lymph nodes**



B symptoms

**Heavy sweating
at night**



Weight loss*



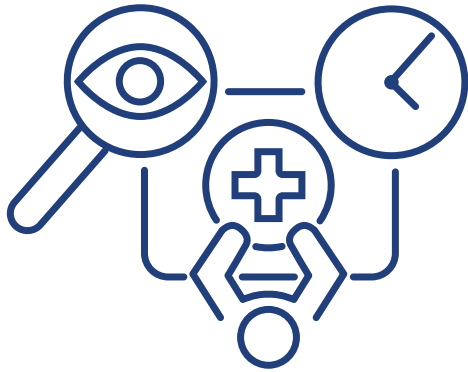
**Fever of
unknown origin**



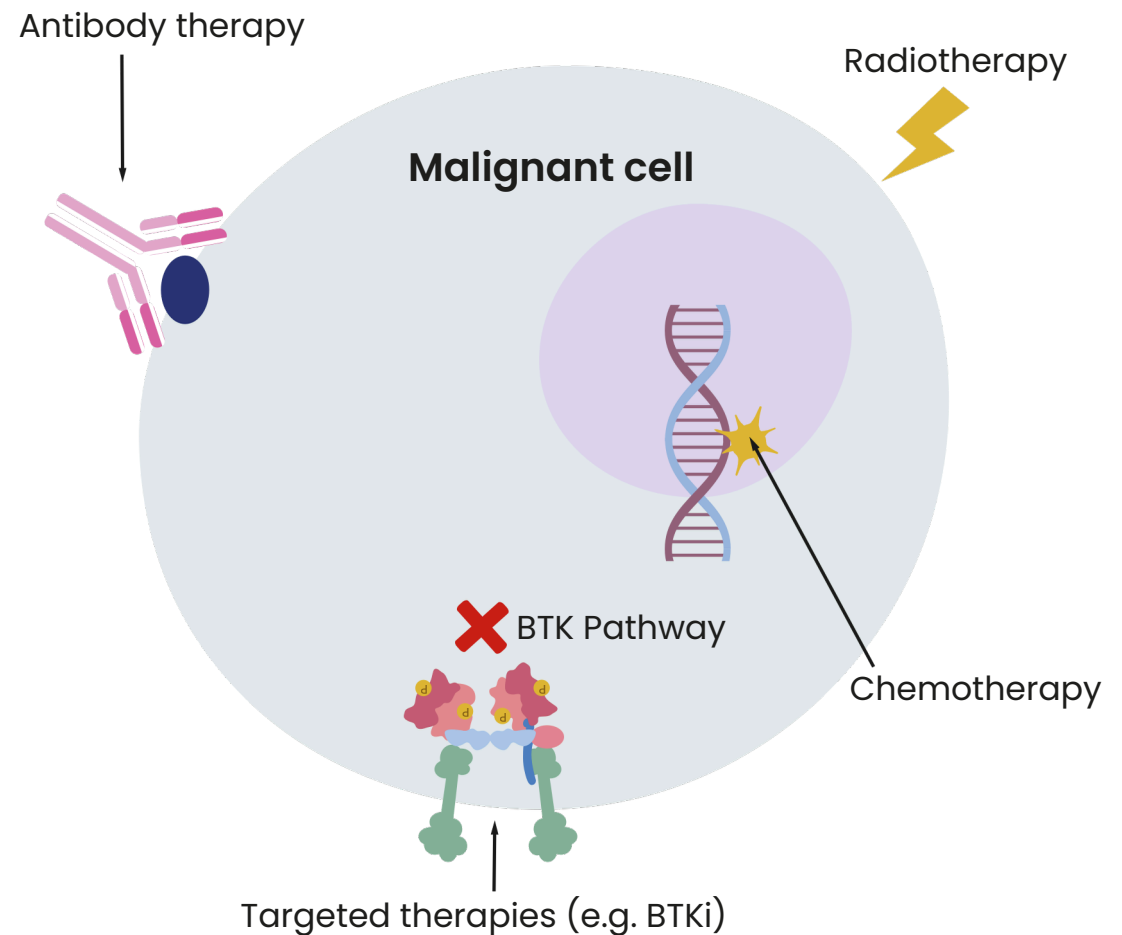
* Unexplained weight loss of more than 10% of the usual body weight in the 6 months prior to diagnosis.

Therapeutic approaches

Active monitoring



Asymptomatic phase, also known as 'Watch and Wait'. You will have regular check-ups and tests. There is no need for treatment in this phase; an early therapy would not be beneficial.



Useful links and contacts

lymphome.ch

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HOPOS Umbrella Organization of Hemato-Oncological Patient Organizations Switzerland

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SCI - Swiss Cancer Institute

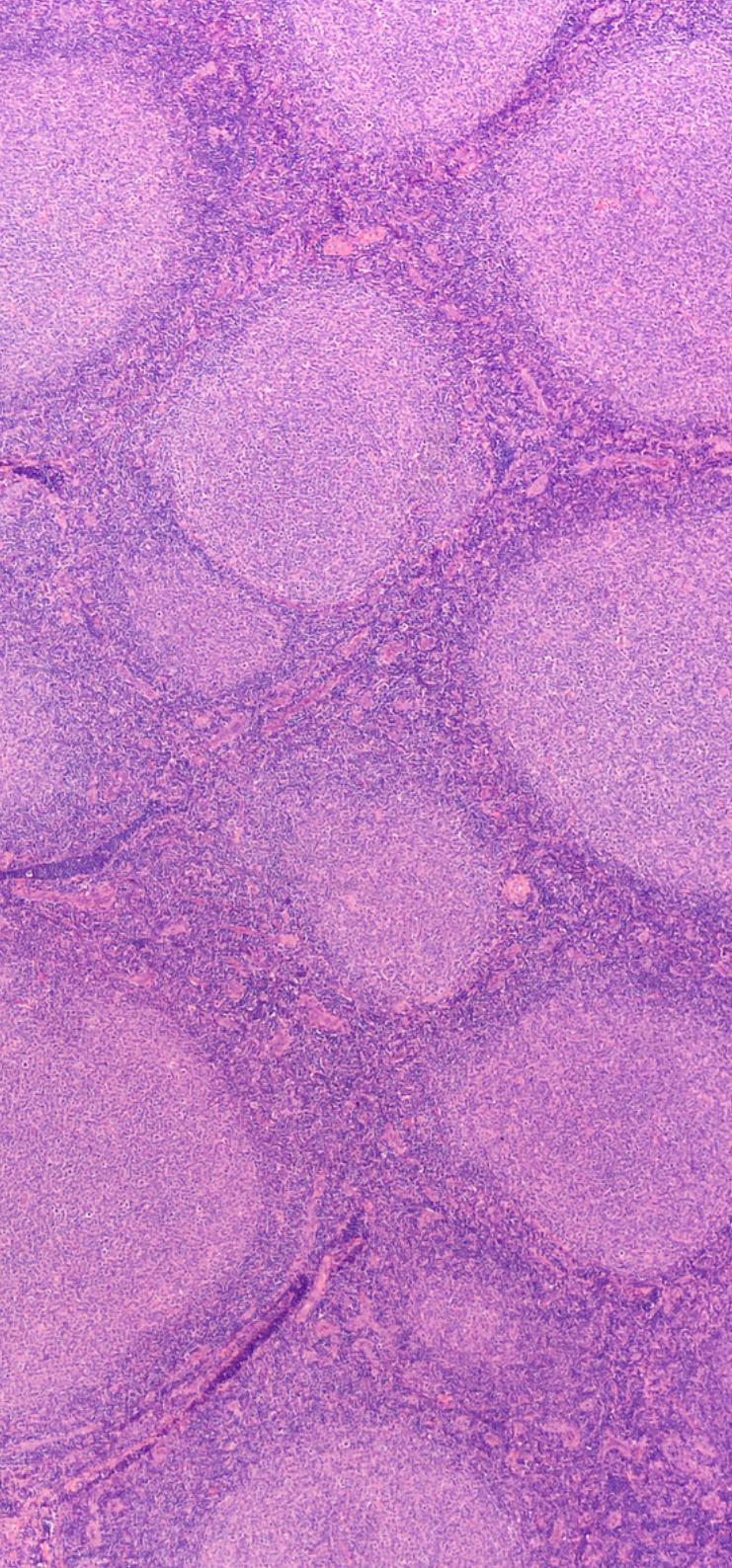
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This material is provided to the healthcare professional as a support for discussion with the patient and allows for the inclusion of notes related to the discussion between healthcare professional and patient for use by the patient.

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