

Haematology – Clinical Guidelines – Monoclonal Gammopathy of Undetermined Significance (MGUS) – Discharge Advice for GPs

Advice applies to very low risk patients with MGUS: IgG band, less than 15 g/L and normal Free Light Chains)

Monitor FBC, U&E, Creatinine and Ca⁺⁺ and Serum Electrophoresis annually
Dipstick urine for protein annually

Reasons to re-refer:

- Monoclonal Band rising unexpectedly (>50% increase compared to baseline)
- Developing a significant cytopenia (for instance):
 - Hb dropping below 100 g/l
 - Neutrophils below $1.5 \times 10^9/l$
 - Platelets $< 80 \times 10^9/l$
- Developing renal impairment
- Severe proteinuria with 24 hrs proteins $>1,5g/24$ hours or ++ or +++ on Dip stick examination.
- Unexplained hypercalcaemia
- Pathological fracture
- Unexplained bone pain
- Lymph nodes enlargement with >3 lymph nodes >3 cm diameter
- Unexplained weight loss > 3 kg within <3 months of time.

General Advice:

- No specific dietary advice required.
- Administer all usual vaccines (Flu Pneumovax etc.)