

## Pan-London Suspected Cancer Referral Guide - Haematology

### THE FOLLOWING SHOULD BE REFERRED AS AN EMERGENCY FOR IMMEDIATE ASSESSMENT:

- Children with UNEXPLAINED hepatosplenomegaly, lymphadenopathy, or petechiae
- Abnormal blood count/film suggesting acute leukaemia
- Spinal cord compression from a possible malignancy
- Renal failure suspicious of myeloma

Back pain with red flag symptoms may feature the following:

- Previous history malignancy
- Age >40 with new onset back pain
- Weight loss
- Previous longstanding steroid use
- Recent serious illness
- Recent significant infection
- Saddle anaesthesia
- Reduced anal tone
- Hip or knee weakness
- Generalised neurological deficit
- Progressive spinal deformity
- Lytic lesions on x-ray
- Non-mechanical pain (worse at rest)
- Thoracic pain
- Fever/ rigors
- General malaise
- Urinary retention
- Leg weakness
- Limb numbness
- Ataxia
- Bilateral leg pain
- Perianal sensory loss
- Erectile dysfunction

### MYELOMA

People aged 40 and over with any of the following:

- Persistent bone pain
- Back pain associated with red flags symptoms (see box to left)
- UNEXPLAINED fracture.

The pan-London Haematology clinical reference group defines 'persistent bone pain' as an UNEXPLAINED extreme tenderness or aching in one or more bones that persists beyond six weeks.

An UNEXPLAINED or pathological fracture usually occurs with normal routine activities and is unexplained by osteoporosis or trauma

### LEUKAEMIA

Adults with any of the following:

- Pallor
- Persistent fatigue
- UNEXPLAINED fever
- UNEXPLAINED persistent or recurrent infection
- Generalised lymphadenopathy
- UNEXPLAINED bruising
- UNEXPLAINED bleeding
- UNEXPLAINED petechiae
- Hepatosplenomegaly

Offer a full blood count, calcium and plasma viscosity or erythrocyte sedimentation rate to assess for myeloma  
Offer **very urgent protein electrophoresis and a Bence-Jones protein urine test** (to be performed within 48 hours) to assess for myeloma in people

- Aged 40 and over with
  - hypercalcaemia
  - leukopenia
  - a presentation that is consistent with possible myeloma
- If the plasma viscosity or erythrocyte sedimentation rate and presentation are consistent with possible myeloma.

Consider a very urgent full blood count (to be performed within 48 hours)

### LYMPHOMA

Adults presenting with UNEXPLAINED lymphadenopathy or splenomegaly.

Lymphadenopathy which persists for more than 6 weeks or where lymph nodes are larger than 2cm or are increasing in size.

Associated symptoms include:

- Fever
- Night sweats
- Shortness of breath
- Pruritus
- Weight loss
- Alcohol-induced lymph node pain.

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### MYELOMA:

- Protein electrophoresis suggestive of myeloma
- Urine Bence-Jones protein / electrophoresis suggestive of myeloma

### LEUKAEMIA

- Abnormal FULL BLOOD COUNT / BLOOD FILM suggestive of leukaemia
- UNEXPLAINED persistent or recurrent infections
- UNEXPLAINED bruising, bleeding or petechiae

### LYMPHOMA:

- UNEXPLAINED lymphadenopathy
- Persistent lymphadenopathy  $\geq 6$  weeks; lymph nodes  $\geq 2$ cm or increasing in size
- UNEXPLAINED splenomegaly
- Associated symptoms (fever, night sweats, shortness of breath, pruritus or weight loss)

Referral is due to **CLINICAL CONCERNS** that do not meet NICE/pan-London referral criteria (the GP MUST give full clinical details in the 'additional clinical information' box at the time of referral)



**SUSPECTED HAEMATOLOGICAL CANCER REFERRAL**

### RESOURCES

1. CRUK & BDA Oral Cancer Recognition Toolkit [http://www.doctors.net.uk/eClientopen/CRUK/oral\\_cancer\\_toolkit\\_2015\\_open/home.html](http://www.doctors.net.uk/eClientopen/CRUK/oral_cancer_toolkit_2015_open/home.html)
2. NICE Guideline: Suspected cancer: recognition and referral, NG12 (2015) <http://www.nice.org.uk/guidance/ng12>
3. Referral Guidelines for Suspected Cancer, CG27 (2005) <http://webarchive.nationalarchives.gov.uk/20060715141954/http://nice.org.uk/nicemedia/pdf/cg027niceguideline.pdf>
4. NICE Guideline: Improving outcomes in head and neck cancers, CSG6 (2004) <http://www.nice.org.uk/guidance/csg6>
5. NICE Guideline: Myeloma: Diagnosis and management NG35 (2016) <http://www.nice.org.uk/guidance/ng35/chapter/Recommendations#laboratory-investigations>