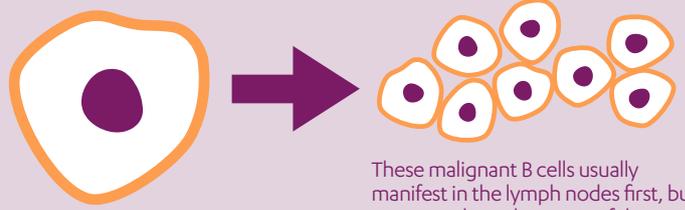


Mantle Cell Lymphoma (MCL)

A rare and aggressive B-cell malignancy

What is Mantle Cell Lymphoma?^{1,2}

MCL affects the lymphatic system and is an aggressive form of blood cancer which originates from B cells, a type of white blood cell (lymphocyte)



MCL typically results from a malignant transformation of a B lymphocyte in the outer edge of a lymph node follicle (the mantle zone)

These malignant B cells usually manifest in the lymph nodes first, but can spread to other parts of the lymphatic and extralymphatic system where they may build up in large numbers. Malignant B cells can accumulate within the bone marrow, liver, spleen or bowel.

Signs and symptoms^{2,3}

- Swollen lymph nodes
- Liver and spleen enlargement
- Diarrhoea, abdominal pain and nausea
- Excessive weight loss
- Recurrent fevers, heavy sweating at night
- Persistent fatigue

Prevalence and patients^{1,4}

MCL is more prevalent in men

65 Median age at diagnosis

4-5 years Median overall survival rate

Diagnosis³

Unfortunately, due to its ability to grow aggressively and spread quickly, people with MCL are often diagnosed in the later stages of the disease

Diagnosis and staging of MCL may include the following examinations:



Physical examination



Blood and other laboratory tests



Biopsy



Imaging tests (X-rays or CT scans)

Staging⁵

The following stages are most often used to determine the extent of MCL:

- Stage I**
Malignancy is in a single region/lymph node
- Stage II**
Malignancy in two separate lymph nodes/organs confined to one side of the diaphragm
- Stage III**
Malignancy has spread above and below the diaphragm, or lymph nodes above the diaphragm with involvement of the spleen
- Stage IV**
Widespread disease beyond the lymph nodes affecting organs including liver, bone marrow or lungs

Treatment^{*6,7,8,9,10,11}

Patients commonly receive multiple treatments over the course of their disease

- Chemotherapy
- Radiation therapy
- Biologic therapy
- Stem cell transplant therapy
- Targeted non-chemo agents

MCL can be a challenging disease to treat. Many patients will relapse or become resistant to treatment.

MCL treatments have improved in recent years. However, MCL remains a serious and fatal malignancy for which there is a high unmet need for new treatments. Many promising new therapies are currently being investigated.¹²

*All medicines and therapies have side effects; patients should talk to their doctors about which therapies are appropriate for them

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