



Monoclonal Gammopathy of Unknown Significance (MGUS)

- MGUS is an asymptomatic plasma cell dyscrasia that is present in more than 3% of the general Caucasian population older than age 50 and has a small risk of progression to multiple myeloma of 1% per year
- It is defined by the presence of a detectable paraprotein (IgG/A/D/M; kappa or lambda) by serum protein electrophoresis or abnormal kappa:lambda ratio detected by serum free light chains
- No evidence of target organ dysfunction (CRAB criteria): hyperCalcaemia, Renal failure, Anaemia, Bony lytic lesions on skeletal survey

Note: IgM paraprotein may be associated with a lymphoproliferative disorder (Waldenstrom’s macroglobulinaemia) – please organise a CT neck/chest/abdomen/pelvis prior to referral

Information Required

- Presence of Red Flags
- Duration of symptoms
- Current medications
- CT report if IgM paraprotein

Investigations Required

- Serum protein electrophoresis and serum free light chains
- Full Blood Examination
- Biochemistry including calcium and albumin
- Skeletal survey (X-ray)

Fax Referral to

Flinders Medical Centre Haematology Fax: 8404 2152

Red Flags

- 🚩 Hypercalcaemia (not due to medications or endocrine dysfunction)
- 🚩 Anaemia
- 🚩 Renal failure with positive Bence-Jones protein
- 🚩 Lytic lesions on X-ray or pathological fractures
- 🚩 Lymphadenopathy with IgM paraprotein
- 🚩 Hyperviscosity symptoms with IgM paraprotein

Suggested GP Management

- Blood tests (FBE, Serum EPG, Serum free light chains, Biochemistry) every 6 months
- If paraprotein is rising, repeat the above blood tests again in 3 months. If stable at 3 months for two readings, then tests can be performed every 6 months again.
- Refer to Haematology clinic if develops any symptoms/signs of target organ damage (CRAB criteria) or if there is evidence of a sustained rise of >25% in paraprotein in 2 consecutive blood tests.

Clinical Resources

- Korde et al. *Monoclonal gammopathy of undetermined significance (MGUS) and smoldering multiple myeloma (SMM): novel biological insights and development of early treatment strategies*. Blood. May 26, 2011; 117(21): 5573–5581.

Patient Resources

- Myeloma organization www.myeloma.org.au
- Leukaemia organization <http://www.leukaemia.org.au/blood-cancers/myeloma>

General Information to assist with referrals and the and Referral templates for FMC and RGH are available to download from the SALHN Outpatient Services website www.sahealth.sa.gov.au/SALHNoutpatients

Version	Date from	Date to	Amendment
1.0	August 2014	August 2016	Original