American Heart Association.

# AL-Amyloidosis

Clinician Pocket Guide

## Clinical Clues

**General:**
Weakness, unexplained fatigue, macroglossia

**Hematologic:**
Easy bruising, periorbital purpura (raccoon eyes)

**Gastrointestinal:**
Significant unintentional weight loss, diarrhea/ constipation, malabsorption, unexplained GI bleeding, hepatomegaly

**Neurologic:**
Peripheral neuropathy, carpal tunnel syndrome, autonomic dysfunction

**Cardiac:**
Dyspnea, hypotension, edema, arrhythmias, increased L-Ventricular wall thickness

**Renal:**
Proteinuria, nephrotic syndrome, kidney dysfunction

## Suspect Amyloidosis?

Act Swiftly with These Tests

### Initial Screening Tests

- Serum free light chains (kappa & lambda)
- Serum electrophoresis with immunofixation
- Random urine electrophoresis with immunofixation
- Troponin T & NT-proBNP
- Electrocardiogram
- Echo (with strain imaging)/Cardiac MRI (with and without contrast)

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*Scan or Click Here to Learn More!*

## What is AL-Amyloidosis?

AL-Amyloidosis (Light Chain) is a rare plasma cell disorder marked by misfolded immunoglobulin light chains forming amyloid fibrils that deposit in vital organs, causing progressive dysfunction and requiring specialized, multidisciplinary care.

## Early Recognition is Key. Refer Early!

- Refer to an amyloidosis center, if possible, for comprehensive care.
- If an amyloidosis center is unavailable, consult with hematology and cardiology ASAP.
- **Multidisciplinary collaboration is critical to improve outcomes!**

**Questions or Referrals? Reach Out To:**

Contact Info: