UNDERSTANDING CHRONIC LYMPHOCYTIC LEUKEMIA

Chronic lymphocytic leukemia, or CLL, is a slow-growing cancer in the blood and bone marrow.[1] It is the most common type of adult leukemia in the U.S.[2]

20,110

ESTIMATED NEW CASES OF CLL IN THE U.S. IN 2017[2]

CLL is generally a disease that affects older adults.[3]

70

AVERAGE AGE AT DIAGNOSIS[4]

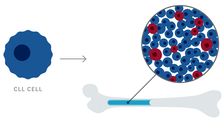
AS MANY AS

89%

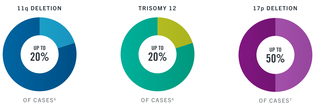
MAY HAVE OTHER MEDICAL CONDITIONS AT DIAGNOSIS[5]

In people with CLL, the leukemia starts in white blood cells called **lymphocytes**.[1]

These CLL cells multiply uncontrollably, eventually crowding out normal cells in the bone marrow and in the bloodstream.[1]



Sometimes, genetic changes are present in CLL cells that can make the disease more difficult to treat. Common types of genetic changes associated with poor outcomes in people with CLL include:[6]



Signs and symptoms of CLL vary and may take years to appear.[1]

Physicians may recommend a **"watch and wait"** or observational approach until disease progression for some people with CLL who do not show any symptoms.[8]

Symptoms of CLL may be seen in other conditions as well. Only a doctor will be able to tell if the symptoms are related to CLL.[9]

PERSISTENT WEAKNESS AND TIREDNESS

WEIGHT LOSS

SWOLLEN LYMPH NODES OR ENLARGED SPLEEN

FEVER

REPEATED INFECTIONS

BLEEDING

CLL is incurable.[8]

Although signs of CLL may disappear for a while after initial treatment, many people require additional treatment due to the return of cancerous cells.[8]

RADIATION

CHEMOTHERAPY

BONE MARROW OR STEM CELL TRANSPLANT

MONOCLONAL ANTIBODIES

OTHER TARGETED AGENTS

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