Leukaemia Care
YOUR Blood Cancer Charity

Chronic Myeloid Leukaemia (CML)

About CML

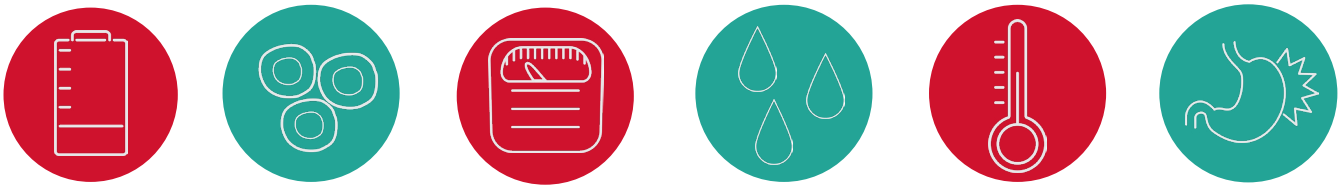
White blood cell

CML is a slow-growing type of blood cancer. It starts in bloodforming cells in your bone marrow called myeloid stem cells. If you have CML, these cells divide and mature uncontrollably. They build up in your bone marrow and stop it making enough healthy blood cells.

Around 830 people in the UK are diagnosed with CML every year. It can affect people of any age, but it is most common in people over 60 to 65 years old.

We do not know exactly what causes CML. However, it is not because of anything you have done. **You cannot catch CML or pass it on to anyone else.**

Some people with CML have no symptoms and are diagnosed after a blood test for something else. But symptoms could include:



Fatigue | Anaemia | Unexplained weight loss | Night sweats | Fever | Tummy pain or bloating

A feeling of fullness | Bleeding or bruising | Infections | Bone pain | Discomfort under ribs

CML is diagnosed on blood tests and bone marrow tests.

Your haematology team might mention the **Philadelphia chromosome** or the ***BCR-ABL1*** gene. These are genetic changes found in the leukaemia cells of people with CML.

CML has two main phases:

- The chronic phase, when it is slow-growing. Most people are in the chronic phase when they are diagnosed.
- The blast phase, when it is growing more rapidly. This needs more intensive treatment.

What is the treatment for CML?

Most treatments aim to keep your CML under control rather than 'cure' it, but they are usually very effective.

Most people with CML have a normal life span and a good quality of life.

If your CML is in the chronic phase, the usual treatment is a targeted medicine called a tyrosine kinase inhibitor (**TKI**).

- TKIs are tablets that you take by mouth. They are generally highly effective at keeping CML under control.
- TKIs used to treat CML include imatinib, dasatinib, nilotinib, ponatinib, bosutinib, and asciminib.
- Each TKI has a different profile and might cause different side effects. If your CML does not respond to one, it might respond to another.

If your CML is in the blast phase, you might have a TKI alongside chemotherapy. You might also have a stem cell transplant.

Depending on your circumstances, your haematology team might suggest other treatments.

You might also need medicine to prevent or treat symptoms or side effects. This is called supportive care. It does not treat your CML itself, but it helps you feel better.

You will have regular tests during your treatment to monitor how well your CML is responding.

For more information about CML, follow the link, search 'CML' at www.leukaemiacare.org.uk or scan the QR code. This also includes information on ordering free booklets via our online shop.

If you have any feedback, or you'd like a list of the references we used to create this factsheet, please email information@leukaemiacare.org.uk or call **01905 755977**.

We're here for you if you need support. Scan the QR code, click the link or search 'support for you' at **leukaemiacare.org.uk** to find out what we offer.

Want to talk?

Call our freephone helpline on **08088 010 444**
(free from landlines and all major mobile networks)
Message us on Whatsapp at **07500068065**
www.leukaemiacare.org.uk
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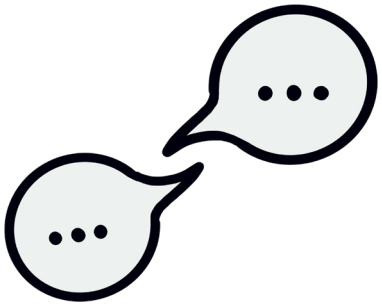

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