



## The CLL Bloodline

November, 2017

Over the course of a year of monthly meetings, The CLL Bloodline will teach the **BASICS** needed to understand CLL, bring news, help with the acronym and new vocabulary, and offer simple fun quizzes.

### MONTHLY QUIZ:

The spleen is important in CLL. All of the following are true **EXCEPT**:

1. The white pulp acts as an immune organ, much like an enlarged lymph node. Lymphocytes, both normal and cancerous, can grow here sometimes leading to massive splenic enlargement.
2. The red pulp acts to rid the body of old red blood cells and platelets and recycles their contents, including the iron. When enlarged, it can overdo the clearing out leading to anemia and low platelets.
3. The marginal zone is located between the red and white pulp. It acts as a blood filter trapping antigens from the circulation and passing them on to the white pulp where the lymphocyte can act on them.
4. The spleen can serve as a back up to the bone marrow by releasing blood cells into the circulation.
5. One can live without a well-functioning spleen or even after its total removal.
6. Removal of the spleen is sometimes done prophylactically in CLL to lower the risk of certain serious infections.

**The correct answer is #6** The spleen actually helps the body defeat certain serious (encapsulated) bacterial infections that can cause pneumonia and meningitis and other infections. The rest are all correct.

### NEWS: November 2017:

The CLL Society with 11 research centers has launched its major patient survey, **(2017 CLLDATA)** CLL Diagnosis and Treatment Assessment: The Patient View, to help capture the voice of CLL patients and to identify their unmet needs. Visit the CLL Society website for more information. Thanks for helping.

### THE BASICS: Definitions and Diagnosis

In our May issue of *The CLL Bloodline*, we discussed some factors that go into deciding your choice of therapy. This month we will continue our review of large categories of treatment.

**Targeted Therapies (TT)** are drugs that interfere with specific molecules involved in cancer cell growth and survival. In CLL, these are usually monoclonal antibodies (MABs) that attack a protein found on the cancer cells' surface. This may also be found on normal cells but not on most cells. An example would be rituximab that targets CD20 found on cancerous and normal B cells. TT may also block pathways that are critical to the cancer's survival such as BTK by ibrutinib or PI3K by idelalisib in CLL. Unlike chemotherapy, TT don't generally damage DNA and may be better tolerated. Targeted therapies also tend to be newer and more expensive.

### WORD/ACRONYM OF THE MONTH:

**Biologic therapy:** Biologic therapy is a treatment that uses the patient's immune system to fight cancer. These are substances or modified substances made from living organisms to fight cancer such as MABs. Just to confuse things, it may also be called biotherapy or immunotherapy or targeted therapy.

***If the CLL Society has helped you or a loved one, please consider making a contribution.***