Neuropathy associated with monoclonal gammopathy

General information

Abnormal immunoglobulin protein (paraproteins) are found in the blood.

Monoclonal gammopathies include (multiple) myeloma

Waldenstrom's macroglobulinemia

non-malignant entities such as monoclonal gammopathy of undetermined significance (MGUS). MGUS patients will develop multiple myeloma (MM) at a rate of 1.5%/year, but the risk of developing a lymphoproliferative disorder before they die is only 11%. Most cases of MM are preceded by MGUS. MGUS can also progress to Waldenstroms macroglobulinemia, amyloidosis, B-cell lymphoma, or chronic lymphocytic leukemia. Criteria for MGUS:

a) monoclonal paraprotein band<30g/l(which is less than with MM)

b) plasma cells <10% on bone marrow biopsy

c) no evidence of bone lesions of MM, hypercalcemia, or renal insufficiency related to the paraprotein, and

d) no evidence of another β-cell proliferative disorder

Much effort has gone into determining which benign gammopathies are or are not likely to progress, and will not be addressed here.

≈ 10% of patients with neuropathy with no apparent etiology will be determined to have a monoclonal gammopathy (malignant or otherwise).