



American  
Heart  
Association.

# AL-Amyloidosis

## Clinician Pocket Guide

### Clinical Clues

**General:**

Weakness, unexplained fatigue, macroglossia

**Neurologic:**

Peripheral neuropathy, carpal tunnel syndrome, autonomic dysfunction

**Hematologic:**

Easy bruising, periorbital purpura (raccoon eyes)

**Cardiac:**

Dyspnea, hypotension, edema, arrhythmias, increased L-Ventricular wall thickness

**Gastrointestinal:**

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

**Renal:**

Proteinuria, nephrotic syndrome, kidney dysfunction

### Suspect Amyloidosis?

Act Swiftly with These Tests

#### Initial Screening Tests

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Serum free light chains (kappa & lambda)

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Serum electrophoresis with immunofixation

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Random urine electrophoresis with immunofixation

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Troponin T & NT-proBNP

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Electrocardiogram

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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: