

Editorial on Acute Myeloid Leukemia Sophia Roberts*

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Editorial

Acute myelogenous leukemia may be defined as a cancer of the blood and bone marrow, it starts in your bone marrow, the soft inner parts of bones. AML usually begins in cells that turn into white blood cells, but it can start in other blood-forming cells, as well. It can sometimes spread to other parts of the body including the lymph nodes, liver, spleen, central nervous system and testicles.

AML causes and risk factors

Acute myelogenous leukemia occurs when a bone marrow cell develops changes (mutations) in its genetic material or DNA. Acute myeloid leukemia risk factors include: Increasing age, smoking, exposure to high doses of radiation, certain blood conditions such as myeloproliferative disorders, coming into contact with certain chemicals such as benzene, pesticides, ionizing radiation, some cleaning products, detergents, and paint strippers, certain genetic syndromes such as down syndrome, trisomy 8, neurofibromatosis type 1, and LiFraumeni syndrome, a parent or sibling who had AML [1].

AML symptoms Fatigue, fever, weight loss or loss of appetite, bone pain, shortness of breath, headaches, unusual bleeding or bruising, tiny red spots on your skin, swollen gums, swollen liver or spleen, frequent infections, Pale skin etc. [2].

AML diagnosis

Blood tests: A complete blood count (CBC) shows how many of each type of blood cell you have. Imaging tests: MRIs, X-rays, CT scans, and ultrasounds give a clearer picture of what's going on inside you [3].

Bone marrow tests: A blood test can suggest leukemia, but it usually takes a bone marrow test to confirm the diagnosis.

Spinal tap and Genetic tests: Your doctor can collect cerebrospinal fluid by inserting a small needle into the spinal canal in your lower back. A laboratory can look at your leukemia cells for gene or chromosome changes.

AML treatment

There are different types of treatment for patients with acute myeloid leukemia which depends on several factors, including the subtype of the disease, your age, your overall health and your preferences.

Remission induction therapy: Remission induction therapy uses chemotherapy to kill the existing leukemia cells in your body.

Consolidation therapy: This is also called post-remission or remission continuation therapy. The goal of consolidation therapy is to destroy any remaining leukemia cells.

Therapies used in these phases include:

Chemotherapy: Certain drugs can kill cancer cells or keep them from dividing. You might take these medicines by mouth, through an IV, or through a shot into another part of your body.

Radiation: High-energy X-rays can also stop cancer cells. Your doctor might use a large machine to send radiation toward the cancer. Or they may insert a radioactive needle, seed, or wire into your body, on or near the cancer.

Stem cell transplant: Because AML treatment can also kill healthy cells, you might get stem cells that can grow into blood cells. They might come from you or from another person. Targeted therapy: This uses drugs to attack specific genes and proteins involved with the growth and spread of cancer cells.

Coping and support

1. Learn enough to make decisions about your care.
2. Lean on family and friends.
3. Take care of yourself.

References

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- 2 <https://www.webmd.com/cancer/lymphoma/acute-myeloidleukemia-symptoms-treatments#2>
- 3 <https://www.cancer.gov/types/leukemia/patient/adult-aml-treatment-pdq>