

Diagnostic considerations

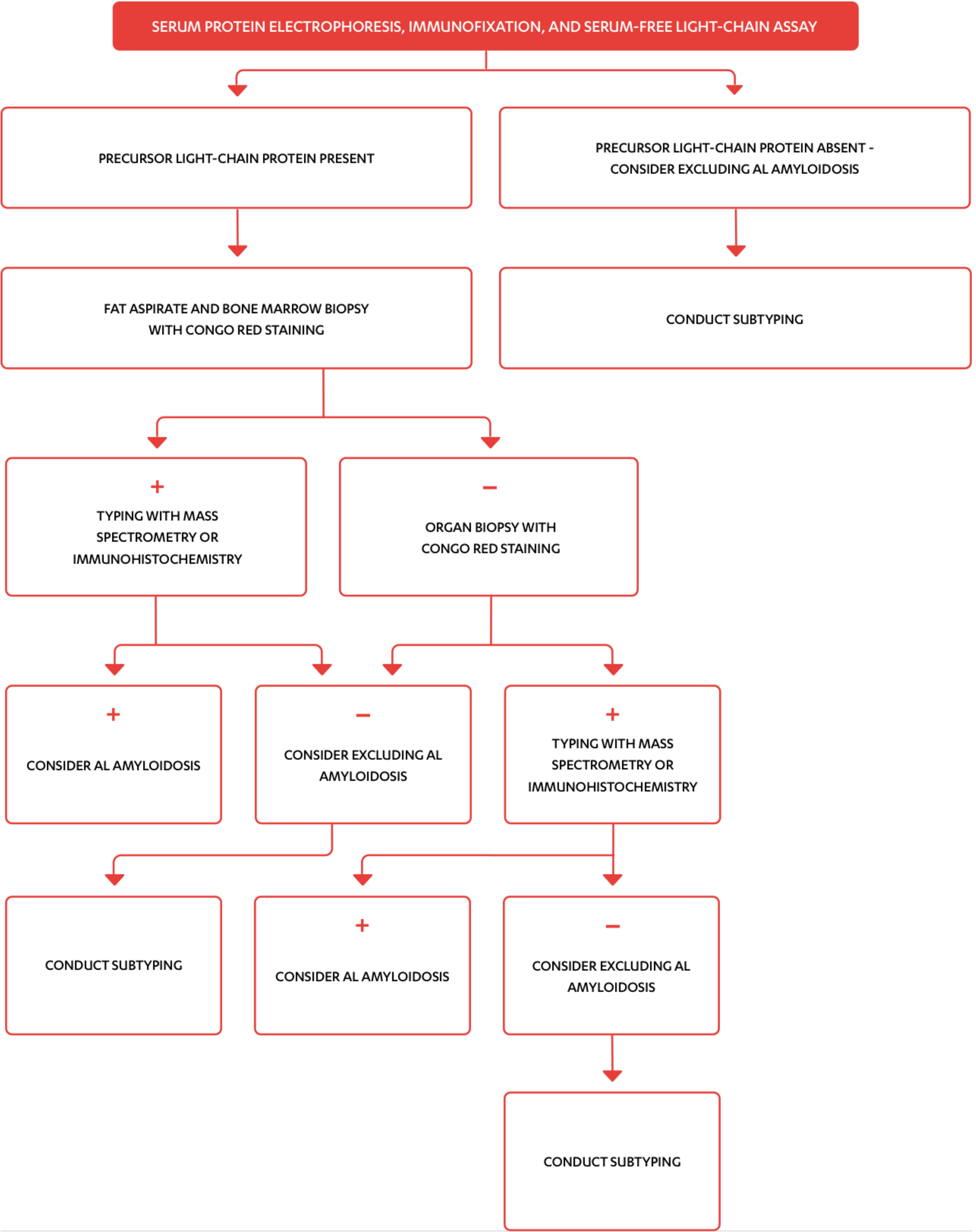
AL amyloidosis is a multifaceted disease that requires many considerations. Find out about the potential factors and tests for patients with suspected AL amyloidosis and how to subtype patients once a positive AL amyloid biopsy has been obtained.

Disclaimer: The information in this section is being provided for educational purposes and is not intended to suggest or recommend any manner or method of diagnosis or treatment.

Considerations/tests for AL Amyloidosis	Sub-typing AL amyloidosis
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There are a number of potential factors and tests to consider when AL amyloidosis is suspected. These can vary by region or country and may not all be conducted for any one patient. Below are the various tests for consideration when diagnosing AL amyloidosis and in the next tab you can find the considerations when subtyping amyloidosis.^{[1][2][3][4][5][6][7]}

Multiple organ and tissue involvement raise suspicion of AL amyloidosis



DPD=3,3-diphosphono-1,2-propanodicarboxylic acid; PYP=pyrophosphate; TTR=transthyretin.

References

[1] Desport E, et al. *Orphanet J Rare Dis.* 2012;7:54.
[2] Merlini G, et al. *Nat Rev Dis Primers.* 2018;4(1):38.
[3] Gertz MA, et al. *Nat Rev Cardiol.* 2015;12(2):91–102.
[4] Vaxman I and Gertz M. *Acta Haematol.* 2019;141(2):93–106.
[5] Kapoor M, et al. *J Neuromuscul Dis.* 2019;6(2):189–99.
[6] Bokhari S, et al. *J Nucl Cardiol.* 2014;21(1):175–84.
[7] Connors LH, et al. *Circulation.* 2016;133(3):282–90.

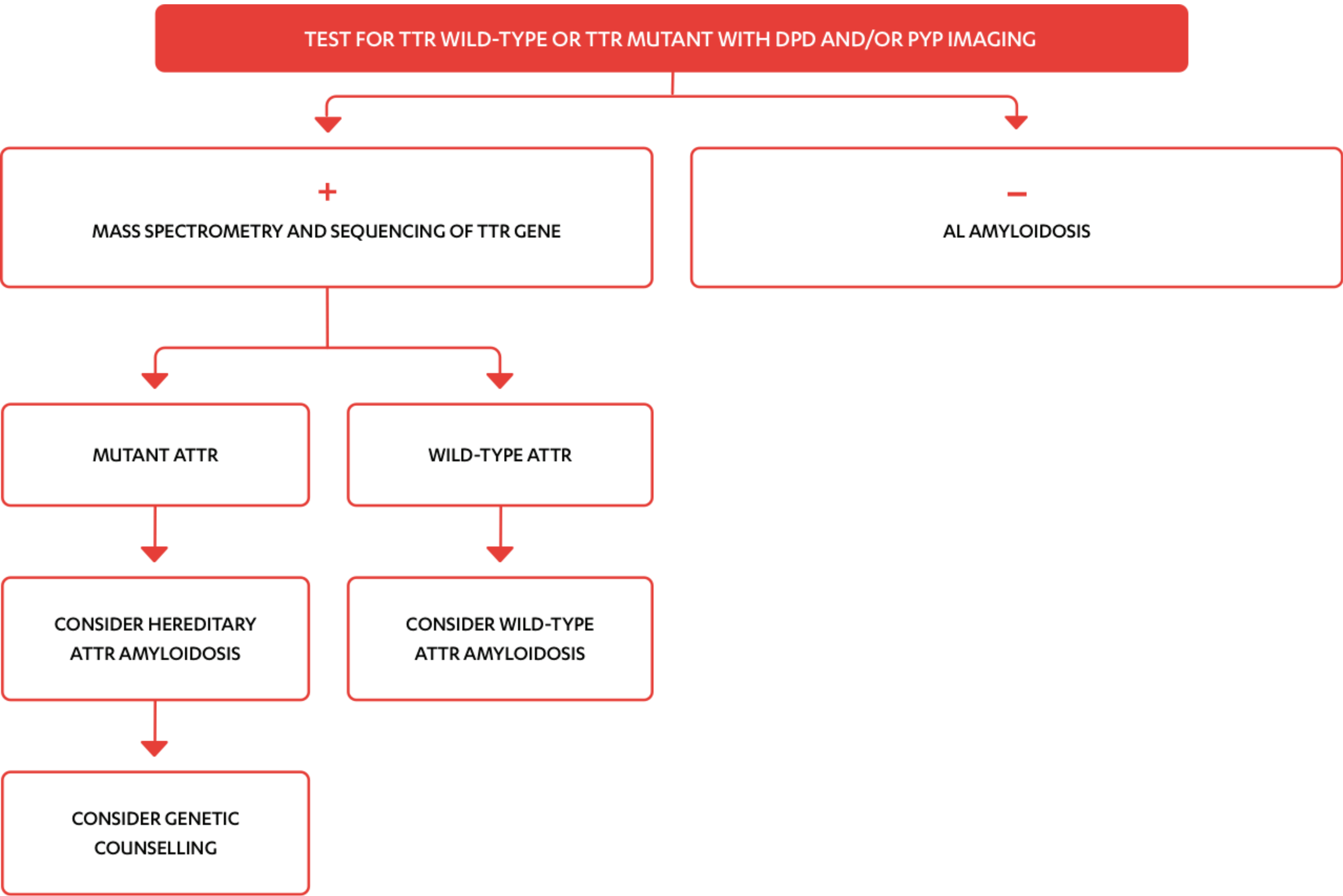
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Explore these diagnostic considerations for sub-typing AL amyloidosis ^{[1][2][3][4][5][6][7]}



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References

[1] Desport E, et al. *Orphanet J Rare Dis.* 2012;7:54.

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