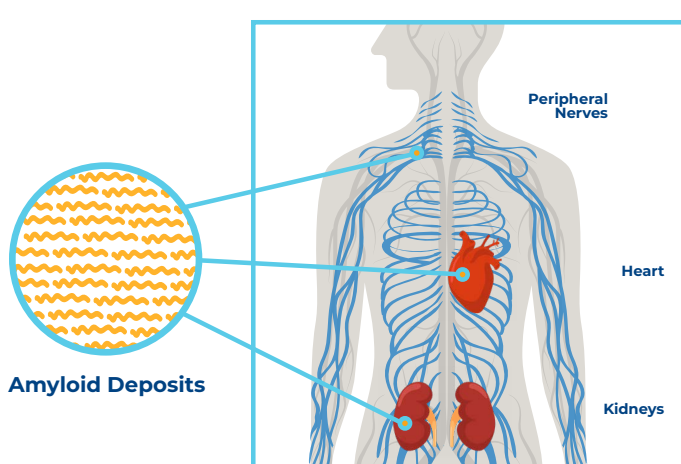


Amyloid light chain Amyloidosis (AL)

WHAT IS AMYLOIDOSIS?

Amyloidosis is a **group of complex rare diseases** caused by abnormal proteins that **misfold and clump together to form amyloid deposits** in tissues or organs, including the heart, kidney and peripheral nerves.¹⁻³

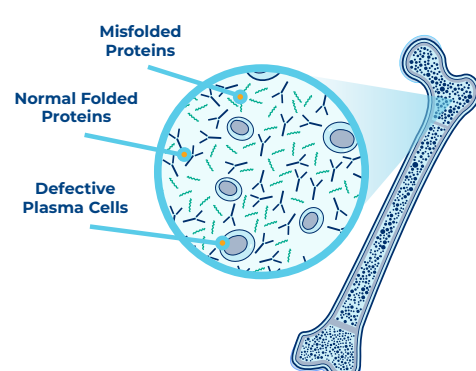
This build up can result in **significant organ damage and organ failure** that can severely impact quality of life and can ultimately be fatal.^{1,3}



WHAT IS AL?

Amyloid light chain amyloidosis, also referred to as AL, is a systemic and progressive type of amyloidosis. In AL, a type of protein called **light chains are produced abnormally by defective plasma cells in the bone marrow**. These proteins misfold and form amyloid deposits.^{4,5}

Accumulation of amyloid, particularly in the heart and kidneys, can cause **progressive damage** and may lead to **premature death**, most commonly due to **cardiac failure or irregular heart rate** (arrhythmia).^{4,5}



Diagnosed prevalence in adults is



AL often occurs **from ages 50-80** but can be diagnosed in people **as early as their late 20s**.⁷

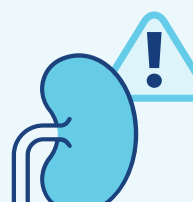
The median age of diagnosis is **60-67 years**.⁷



About 60% of people diagnosed with AL **are males**.⁸



More than 75% of people with AL **develop cardiomyopathy**, where the amyloid buildup **causes the heart to have a harder time pumping blood** to the rest of the body.⁹



More than 60% of people with AL **develop nephropathy**, where the amyloid buildup **impairs kidney function**.⁹

People with AL may experience a range of signs and/or symptoms, including:⁹⁻¹¹



Swollen arms and legs



Extreme shortness of breath



Abnormal heartbeat



Nausea



Diarrhoea



Tingling in the extremities



Carpal tunnel syndrome



Enlarged tongue



Rash around eyes



and many other **vague symptoms that mimic other diseases** that often complicate diagnosis.

HOW IS AL DIAGNOSED?

Diagnosis of AL can be relatively straightforward but is **often delayed due to non-specific signs and symptoms** that can vary by person. It can take **an average of 3 years** to receive a correct diagnosis.¹²



Once suspected, blood and urine tests are conducted first, followed by a tissue biopsy to confirm the type of amyloidosis.^{13,14}



Imaging of the impacted organs may determine the severity of the condition.¹³



For many people, AL is **not accurately diagnosed until the later stages of the disease**, when **treatment options are limited and prognosis is poor**.

Rapid, accurate diagnosis leading to initiation of treatment is essential to mitigate the impact of this disease on **survival and quality of life**.^{5,14}

WHAT ARE CURRENT TREATMENT NEEDS?

There are no approved treatments that address the significant organ damage caused by the disease.^{5,14}



Most existing amyloidosis therapies focus on preventing and/or suppressing the formation of amyloid deposits. As a result, **the disease and organ damage may continue to progress** due to the existing amyloid deposits and ultimately **lead to organ failure and death**.^{5,14}

Given the progressive nature of AL and its significant impact on quality of life, **there remains a need for increased awareness of the disease and continued innovation to improve outcomes for people living with AL**.^{4,5,15}



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