

Talking to your healthcare provider about myelofibrosis (MF) treatments

There is a lot to think about when you have MF. The disease and its subtypes may feel confusing or overwhelming at times. When things feel overwhelming, try to remember that there are many treatments to help manage your MF, and that you are not alone. Your healthcare team is there to support you.

We have created some questions to help you start talking with your healthcare provider about your MF and about what treatment may be right for you. You may want to use this guide more than once since your MF can change over time.

> **I have:** Primary MF Secondary MF Unsure

> **My risk level is:**

- Low Intermediate-1 Intermediate-2
 High Unsure

> **I have genetic mutations that may affect my treatment.**

- Yes—List: _____
 No Unsure

> **My symptoms are:** (check all that apply)

- | | |
|--|---|
| <input type="checkbox"/> Feeling tired, weak or short of breath | <input type="checkbox"/> Night sweats |
| <input type="checkbox"/> Pale skin | <input type="checkbox"/> Itching skin |
| <input type="checkbox"/> Frequent infections | <input type="checkbox"/> Fever |
| <input type="checkbox"/> Bleeding or bruising easily | <input type="checkbox"/> Bone or joint pain |
| <input type="checkbox"/> Pain in the stomach, feeling full, decreased appetite | <input type="checkbox"/> Weight loss |
| | <input type="checkbox"/> Other: _____ |

> **I have noticed a change in my symptoms since my last doctor's visit:**

- Yes—Describe: _____

 No Unsure

Date: _____

My red blood cell count is:

- High Normal Low Unsure

My white blood cell count is:

- High Normal Low Unsure

My platelet count is:

- High Normal Low Unsure

Check MF type:

- Myelodepletive (cytopenic) MF
 Myeloproliferative MF
 Unsure

> **The 3 most important things I'd like for my MF treatment:**

- Bring my blood cell counts to normal
 Give me more energy
 Reduce my spleen size
 Develop fewest side effects
 Covered by my insurance
 Other—List: _____

> **My concerns or fears about MF treatments:**

If you answered "Unsure" to any of the above, ask your healthcare provider for more information.

Other questions to ask your healthcare provider:

- Given my answers above, what are my treatment options?
- What are the pros and cons of those treatment options?
- What can I do to help improve my quality of life?



Now that you have been diagnosed with MF, it is important to regularly see a doctor who specializes in MF. Scan the code or visit: mpncancerconnection.org/mpn-experts/




What Treatments are Available for MF?

Most medicines for MF aim to relieve the symptoms of the disease, but do not cure it.

The following are some common medicines used to treat symptoms of MF:

Medicine	Who uses this medicine?	What impact does it have on blood cell counts?	What are the possible benefits?	What are the possible side effects?	Specific benefits for patients with anemia?
Ruxolitinib (Jakafi®)	Patients with low-risk MF and FDA approved for people with intermediate-risk and high-risk MF	Can reduce platelet and red blood cell count	May reduce spleen size and improve spleen-related symptoms and fatigue	May cause low platelet count, low red blood cell counts, bruising, dizziness, and headache, risk of infection	No
Fedratinib (Inrebic®)	FDA approved for patients with intermediate-risk-2 (INT-2) and high-risk MF	Can reduce platelet and red blood cell count	Can reduce spleen size and symptom burden	Common side effects include low blood count, nausea, vomiting, diarrhea, loss of appetite and raised liver enzymes	No
Pacritinib (Vonjo™)	FDA approved for patients with intermediate-risk and high-risk MF	Does not cause low white blood cell or low platelet counts	Can stop the biological pathways that cause MF symptoms and reduce spleen volume without reducing platelet count	May cause diarrhea nausea, anemia, and swelling in legs	Yes
Momelotinib (Ojjaara®)	FDA approved for patients with intermediate and high-risk MF with anemia	Can improve anemia and reduce transfusion dependence	May reduce spleen size, improve anemia, and decrease symptom burden	May reduce platelet counts, bleeding, bacterial infection, diarrhea, fatigue, nausea, and dizziness	Yes
Hydroxyurea (Hydrea®)	Used in patients with low-risk MF*	Can reduce blood cell counts (platelets, white blood cells, red blood cells)	May reduce spleen size	May cause below normal blood cell counts, fatigue, skin changes, diarrhea, constipation, skin cancer	No
Peginterferon alfa-2a (Pegasys®, Intron®A, Roferon®A)	Used in patients with low-risk MF*	Can reduce blood cell counts (platelets, white blood cells, red blood cells)	Can treat an enlarged spleen, bone pain, itching, night sweats	May cause fatigue, joint or muscle pain, flu-like illness, itching, throat swelling, or depression	No

- **Stem cell transplant:** This is the only procedure that may cure MF, but it comes with with extreme risks, including risk of fatality. This procedure is not appropriate for most older people or those with other health concerns.
- Splenectomy (removal of the spleen) is performed only in extreme cases.
- Palliative care focuses on pain relief.



Having a low red blood cell count (also called anemia) can be a serious complication of MF. If you have anemia, you may need medicine that specifically treats anemia or a blood transfusion.
Be sure to ask your doctor about how to manage anemia.

*Though Interferon alfa and Hydroxyurea are not FDA-approved for MF treatment, they are often used off-label by doctors in clinical practice to treat MF.