# Patient & Family Guide

2020

# Polycythemia Vera



# Polycythemia Vera

### What is polycythemia vera (PV)?

Polycythemia vera is a type of blood cancer and is also called:

- · Primary Polycythemia
- Polycythemia Rubra Vera (PRV)
- Vaquez-Osler disease

PV causes your body to make extra blood cells. The extra cells are usually red blood cells and platelets. Extra blood cells make your blood thicker. This may cause clots and bleeding problems and interfere with the normal flow of blood. People with PV over the age of 65 have a higher risk of having a stroke or heart attack.

#### What causes PV?

Your bone marrow (spongy material inside your bones) makes blood cells. PV causes your bone marrow to make more blood cells than usual. We don't know why this happens. PV happens most often after age 50 and is slightly more common in males than in females.

# What are the symptoms of PV?

PV happens slowly and there may not be any symptoms early in the disease.

If there are symptoms, they may include:

Blurred or double vision	<ul> <li>Nosebleeds or bleeding gum</li> </ul>		
<ul> <li>Headache or feeling of 'fullness' in the head</li> </ul>	Feeling tired or weak		
Dizziness	<ul> <li>Itching</li> </ul>		
<ul> <li>Upset stomach and weight loss</li> </ul>	A purplish-red colour of the face or skin		
High blood pressure	<ul> <li>Feeling of fullness or pressure below the ribs on the left side</li> </ul>		

# How is PV diagnosed?

A blood test can help diagnose PV. The test may show an increased number of red blood cells and a normal level of oxygen in the blood. The extra blood cells may build up in your spleen, which is a small organ in the left side of your abdomen (stomach area). This will cause your spleen to swell and be bigger than normal. Your healthcare provider can check this by feeling your abdomen or by doing an ultrasound of your abdomen.

#### How is PV treated?

There is no known cure for PV. Treatment usually helps people live many years longer than they would without treatment. Your healthcare provider will talk with you about the treatment options best for you. You may get medications prescribed or need a procedure called a phlebotomy. In rare cases, if it becomes very large or painful, the spleen may need to be removed.

# What is a phlebotomy?

A needle is placed into your vein, letting some of your blood drain through a plastic tube into a bottle. This reduces the amount of blood cells and makes you feel better. It's similar to donating blood.

The amount of blood drained is different for everyone. You will probably have about 250-500 ml (1-2 cups) taken out each time.

You may need to have a phlebotomy done every two to four weeks. This will depend on how fast your blood count returns to normal.

Your healthcare provider may arrange for you to have a phlebotomy in an outpatient treatment area. If this is your first time receiving this treatment, it is encouraged that someone goes with you in case you become dizzy or faint, and need someone to drive you home.

### How do I get ready for a phlebotomy?

To lower the risk of complications during a phlebotomy, it is important that you:

- Drink eight (250ml) glasses of fluid (water, milk, or juice) the day before and the day of your treatment.
- Do not drink coffee, tea, colas, or alcohol on the day of your treatment.
- Make sure you eat your breakfast and lunch before your treatment.
- Arrange to have someone bring you to and from your first appointment.
- Bring a complete list of the medications you are taking, including any over-the-counter medications, herbs, or other supplements.
- If you have cold or flu symptoms, please call the treatment area to rebook your appointment. Refer to the treatment area's cancellation or re-booking policy.

# After your phlebotomy

- The nurse will check your blood pressure and give you something to drink.
- You will need to stay in the treatment area for a short time to make sure you do not get dizzy or faint.
- You may eat and drink as usual.
- You can go back to your usual activities the next day.
- If you have a Band-Aid®, take it off the day after your phlebotomy.

# Follow-up

PV does not usually affect your daily activities or work. You will need to see your hematologist (blood doctor) regularly to be assessed and have your blood checked.

Report any of these problems to your healthcare provider:

- Bleeding (such as gums or nose), increased bruising.
- Swelling of arms or legs.
- Changes in skin colour or temperature.
- Pain in arms or legs.
- Confusion, dizziness.
- Weakness.
- Chest pain, shortness of breath.

Ask your healthcare provider if the following suggestions apply to you:

Do not bathe in hot water. Dry your skin gently	Wear loose-fitting clothing
<ul> <li>Use a toothbrush with soft bristles and be gentle brushing your gums</li> </ul>	<ul> <li>Do not cross your legs or let them dangle at the bedside</li> </ul>
Use an electric razor	<ul> <li>Wear compression stockings You can find these at a drugstore</li> </ul>
Take stool softeners to prevent constipation	Practice deep breathing exercises

If you have any questions about PV, please call the Hematology Clinic at 902-473-6605. The clinic is open Monday to Thursday from 8:30 a.m. to 4:30 p.m. and on Fridays from 8:00 a.m. to 4:00 p.m.

Notes:	

Notes:		

# Looking for more health information?

Find this brochure and all our patient resources here: http://library.nshealth.ca/cancer
Contact your local public library for books, videos, magazines, and other resources.

For more information, go to http://library.novascotia.ca

Nova Scotia Health Authority promotes a smoke-free, vape-free, and scent-free environment.

Please do not use perfumed products. Thank you!

Nova Scotia Health Authority

www.nshealth.ca

Prepared by: Nova Scotia Health Authority Cancer Care Program Approved by: Nova Scotia Cancer Patient Education Committee Designed by: Cancer Care Program Staff

The information in this brochure is for informational and educational purposes only.

The information is not intended to be and does not constitute health care or medical advice.

If you have any questions, please ask your health care provider. The information in this pamphlet is to be updated every 3 years or as needed.

NSCCP-1689 Updated June 2020 ©Nova Scotia Health Authority

