

**GENERAL LONG-TERM FOLLOW-UP RECOMMENDATIONS
FOR ADULT PATIENTS**

These are some important recommendations that can help prevent problems after the transplant. Your doctor might have other recommendations that fit your specific health needs.

1. **Cancer Risk and Prevention:** If you have had a marrow or peripheral blood stem cell transplant, you have an increased risk of cancer. The skin, mouth, breast, thyroid gland and brain are places where cancer can develop after a transplant. You should avoid the use of tobacco products. You should avoid excessive exposure to sunlight in order to minimize the risk of skin cancers. Wear a hat, a long-sleeve shirt and full-length pants. Use sunscreen cream (SPF-15) to protect any uncovered skin, especially on your face and neck.
2. **Routine Care:**
 - a) You should see your doctor every year for a complete history and physical examination, including
 - Blood tests (complete blood count, glucose level, lipid levels, liver function test, etc.)
 - Thyroid hormone levels
 - Test for blood in the stool
 - Pap smear, mammogram every year after age 35 (*females*). If you are taking estrogen or progesterone, the risks, benefits and alternatives should be reviewed in discussion with your gynecologist.
 - b) Oral hygiene is very important. You should have a dental exam every 6 months with cleaning as necessary beginning at one year after the transplant. Please refer to the dental guidelines or call LTFU if you have questions about oral GVHD or about dental procedures during treatment for GVHD.
 - c) You should have an eye exam every year to check for cataracts or problems caused by GVHD.
 - d) Women should do a self-breast exam every month.
3. **Special tests:**
 - a) ***Pulmonary Function Tests:*** Pulmonary function testing should be done at 1 and 5 years after the transplant to detect pulmonary problems. If you have lung problems or are being treated for chronic GVHD, you should have a pulmonary function test every 3 months.
 - b) ***Hepatitis C virus:*** If you have never had a test for Hepatitis C virus, you should have this blood test done, especially if you had transfusions or a transplant before 1991.
 - c) ***CML:*** If you had chronic myeloid leukemia (CML), you should have your blood tested every year to see if any leukemia cells are still present after the transplant. Your doctor can order the test, but we would prefer to have the blood sent to the FHCRC/SCCA laboratory. The LTFU office will send the results of the test to your doctor. The LTFU office will also make any recommendations needed for your care.
 - d) ***Bone density:*** Osteoporosis or loss of calcium in bones can occur after the transplant due to low hormone levels, use of medications like prednisone, and inactivity. The amount of calcium in your bones should be evaluated by an x-ray bone density test at least once, at one year after the transplant. The LTFU office will make recommendations for your care if you have low levels of calcium in your bones.
 - e) ***Adrenal function:*** Patients who have been treated with prednisone for more than a month have inadequate natural production of hormones by the adrenal gland. Therefore, when treatment with prednisone is being tapered or discontinued, careful monitoring is needed to avoid complications caused by inadequate levels of adrenal hormones.
4. **Vaccinations:** You should receive childhood vaccinations at one year after the transplant. The LTFU office can give specific recommendations to your doctor.
5. **Prednisone:** If you are taking prednisone, you should know that this treatment causes loss of calcium in bones. There are some ways to minimize this problem.
 - If your diet does not contain at least 1500 mg of calcium per day, you should take calcium pills.
 - If your diet does not contain at least 800 international units of vitamin D every day, you should take a vitamin pill that contains vitamin D.
 - You should do weight bearing exercises for 20-60 minutes every day.
 - You should have an x-ray bone density test every year.
 - Medications such as Fosamax, Actonel, Pamidronate or Zometa might also help to prevent loss of bone density during treatment with prednisone.
6. **Risk of Infections:** If you have chronic GVHD, you should take antibiotics to prevent infection for at least 6 months after discontinuing all immunosuppressive medications. You should not use herbal medications or naturopathic remedies. If you develop fevers, chills or any signs of infection, you should seek immediate medical attention.