

# Secondary acute myeloid leukaemia (AML)

Acute myeloid leukaemia (AML) is a fast-growing blood cancer. Secondary AML is when AML develops from other cancers or their treatment. Find out about the signs and symptoms, who it might affect and how it is diagnosed and treated.

## Summary

- Secondary acute myeloid leukaemia (AML) is when AML develops from other cancers or after treatment for cancer.
- It is usually diagnosed from blood tests and bone marrow tests.
- Your doctor will recommend treatment based on your needs. You might have intensive or non-intensive treatment.
  - **Intensive treatment** involves chemotherapy. It's usually a treatment called liposomal daunorubicin and cytarabine.
  - **Non-intensive treatment** is gentler. It involves low-dose chemotherapy or targeted medicine.
- It can be hard dealing with side effects and treatment. Ask your friends, family, medical team or Leukaemia Care if you need support.

[Download our factsheet about secondary AML](#) 

## About secondary AML

AML is a fast-growing blood cancer. It develops when blood-forming cells grow out of control. They can build up in your bone marrow and stop it making enough healthy blood cells.

Often, we don't know exactly what causes AML. But sometimes it happens as a result of something else. This is secondary AML. It can develop:

- After treatment for a different cancer.
- From another type of blood cancer. This is usually [myelodysplastic syndrome](#) (MDS) or a [myeloproliferative neoplasm \(MPN\)](#).

Secondary AML affects fewer than 900 people a year in the UK. It happens because blood cancers and cancer treatments can damage the cells in your bone marrow.

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## Signs and symptoms of secondary AML

The [signs and symptoms](#) of secondary AML include:

- Fatigue
- Infections
- Feeling breathless
- Bruising or bleeding
- Fever
- Bone pain
- Low red blood cell count (anaemia)
- A swollen spleen or liver

Some people might not have any new symptoms. You may be diagnosed after routine tests for your other cancer.

The diagnosis is confirmed using blood tests and bone marrow tests.

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## Treating secondary AML

Your medical team will recommend [treatment](#) based on your needs. This might be intensive or non-intensive treatment.

We have separate [information on different treatments](#). This includes how you have them and possible side effects.

## Intensive treatment

Intensive treatment involves chemotherapy. It is usually a treatment called [liposomal daunorubicin + cytarabine](#). It's also known as CPX-351 or Vyxeos.

- You have it through a drip into a vein, or a central line if you have one. You usually have it as a hospital outpatient. You have treatment in cycles, with time in between for your bone marrow to recover.
- You may also have a targeted medicine. This depends on the [genetic changes in your leukaemia cells](#).
- Some people might have a [stem cell transplant](#). This is a very intensive form of treatment. It is not suitable for everyone. Your medical team will explain if it's an option for you.

Sometimes your team might recommend a different type of chemotherapy. They will explain what treatment they recommend, where you will have it, and what you can expect from it. For some treatments, you may need to stay in hospital.

## Non-intensive treatment

Non-intensive treatment is gentler. It aims to control your AML as much as possible. But it does not cure it. It usually involves low-dose chemotherapy or targeted treatment to take at home.

Secondary AML can be difficult to treat. Outcomes vary from person to person. Your medical team are best placed to discuss what they expect for you.

**It can be hard dealing with treatment and its side effects. Don't be afraid to ask for help from family, friends, your medical team or Leukaemia Care.**

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Helpline: [08088 010 444](tel:08088010444)

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## Need support?

You are not alone. We're here for you whether you have a diagnosis yourself or know someone who has. If you'd like advice, support, or a listening ear, call our freephone helpline on 08088 010 444 or send a WhatsApp message to 07500 068 065.

[Talk to us →](#)

## Help us improve our information

We aim to provide information that's reliable, up-to-date, and covers what matters to you. Please complete our short survey to help us improve our information and make sure it meets your needs.

[Complete our short survey →](#)

## About our information

This information is aimed at people in the UK. We do our best to make sure it is accurate and up to date but it should not replace advice from your health professional. Find out more [about our information](#).

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