



KNOW YOUR SCORE



This specially designed myeloproliferative neoplasm (MPN) symptom tracker can be used to record how your symptoms are affecting you over time.

You can then talk it through with your doctor or other healthcare professional at each appointment.

This booklet has been developed and produced by Novartis Pharmaceuticals UK Ltd. It is intended for patients who have been diagnosed with a myeloproliferative neoplasm (MPN) and should not be considered an alternative to advice from a healthcare professional. All data contained within this booklet will remain between you and your healthcare professional.

REPORTING OF SIDE EFFECTS:

If you get side effects with any medication you are taking, talk to your doctor, pharmacist or nurse. This includes any possible side effects not listed in the information leaflet that comes in the pack. You can report side effects via the Yellow Card Scheme at www.mhra.gov.uk/yellowcard (UK). By reporting side effects you can help provide more information on the safety of your medication.

Your weekly symptom tracker

This booklet has been produced for patients who have been diagnosed with an **MPN**. MPNs are a group of related blood disorders.

There are three main types of MPN:

- **Myelofibrosis (MF)**
Abnormal stem cells in the bone marrow (the soft, fatty tissue inside your bones) produce too many cells, which causes the marrow to become scarred.
- **Polycythaemia vera (PV)**
The body makes too many red blood cells.
- **Essential thrombocythaemia (ET)**
The body makes too many platelets.

These MPNs share similarities in symptoms and the impact they can have on patients' lives.

In order to ensure you get the most appropriate treatment for your individual circumstances, it's important to be able to explain your symptoms to your doctor or other healthcare professional and describe how they're affecting your day-to-day life.

The MPN10 Tracker website

This symptom tracker is also available online at: mpntracker.com/en-GB

MPN Tracker

If you are diagnosed with a myeloproliferative neoplasm, including myelofibrosis, polycythaemia vera, or essential thrombocytopaenia

Just **click, toggle,** and **save** to see your total symptom score*

VISIT
MPNtracker.com/en-GB
to get started

*This is neither a diagnosis tool nor a full assessment of your condition or treatment. Please consult your healthcare provider for advice and an explanation of your symptom score.

MPN10: Track the Severity of your MF- or ET-related symptoms

Using the sliders below, enter a number from 0 (absent) to 10 (most frequent/severe) that best describes the severity of, or how much difficulty you have had with, each symptom during the past week.

Fatigue [Slider 0-10]

Night sweats [Slider 0-10]

Early satiety (full or queasy when you eat) [Slider 0-10]

Pruritus (itching) [Slider 0-10]

Bone pain (intermittent, not just pain or stiffness) [Slider 0-10]

Fever (38°C/100.4°F or more) [Slider 0-10]

Unintentional weight loss (in the last 6 months) [Slider 0-10]

MPN10 STEP 1

It takes just a few minutes each week to fill in your MPN10 symptom tracker – it's a simple matter of selecting the number that best describes how severe each symptom has been.

Symptoms are rated on a scale of 0 to 10, with 0 being a symptom that is not present and 10 being a symptom that is the worst imaginable.

1. Have you filled in your name?
2. To keep track over time, ensure you have filled in the date.
3. Have you filled in all the categories?
4. Don't forget that if you don't suffer from one of the symptoms at all, you should still mark it as '0' on the form.
5. Have you filled in the total score?



Make sure you select a number for every symptom and be sure to share your answers with your doctor or other healthcare professional.

Example of a completed tracker

MPN 10 KNOW YOUR SCORE

1

Fill out the form to track the burden of your symptoms.

Name: JOE BROWN

Symptom: 0 if absent and 10 being worst imaginable

Date: 04/12/2016

2

Please rate your fatigue (weariness, tiredness) by circling the one number that best describes your **WORST** level of fatigue during the past 24 hours

Fatigue											
0	1	2	3	4	5	6	7	8	9	10	
(ABSENT)									(WORST IMAGINABLE)		

Circle the one number that describes how much difficulty you have had with each of the following symptoms during the past week

Filling up quickly when you eat (early satiety)											
0	1	2	3	4	5	6	7	8	9	10	
Abdominal discomfort											
0	1	2	3	4	5	6	7	8	9	10	
Activity											
3	1	2	3	4	5	6	7	8	9	10	
Problems with concentration - compared to diagnosis											
0	1	2	3	4	5	6	7	8	9	10	
Night sweats											
0	1	2	3	4	5	6	7	8	9	10	
Itching (pruritus)											
0	1	2	3	4	5	6	7	8	9	10	
Bone pain (diffuse, not joint pain or arthritis)											
0	1	2	3	4	5	6	7	8	9	10	
Unintentional weight loss during last 6 months											
0	1	2	3	4	5	6	7	8	9	10	
(ABSENT)									(WORST IMAGINABLE)		

Fever (> 37.8°C or 100°F)											
0	1	2	3	4	5	6	7	8	9	10	
(ABSENT)									5		

To help you get an overall picture of how you are feeling, you can add up all your scores to calculate your Total Symptom Score.

TOTAL: 36

If you get side effects with any medication you are taking, talk to your doctor, pharmacist or nurse. This includes any possible side effects not listed in the information leaflet that comes in the pack. You can report side effects via the Yellow Card Scheme at <https://yellowcard.mhra.gov.uk/> (UK). By reporting side effects you can help provide more information on the safety of your medication.

What symptoms are tracked?

The 10 symptoms assessed by the MPN10:



Abdominal discomfort



General fatigue



Bone pains



Night sweats



Itching (pruritus)



Fever (high temperature)



Concentration problems



Weight loss



Inactivity /lethargy



Early satiety (feeling full)



"If you notice your symptoms changing, getting better or worse, this tracker can help you tell your doctor and explain how they are affecting you on a day-to-day basis."

Professor Claire Harrison, Consultant Haematologist



Fill out the form to track the burden of your symptoms.

Name:

Symptom: 0 if absent and 10 being worst imaginable

Date:

Please rate your fatigue (weariness, tiredness)

by circling the one number that best describes your **WORST** level of fatigue during the past 24 hours

Fatigue										
0	1	2	3	4	5	6	7	8	9	10
(ABSENT)							(WORST IMAGINABLE)			

Circle the one number

that describes how much difficulty you have had with each of the following symptoms during the past week

Filling up quickly when you eat (early satiety)										
0	1	2	3	4	5	6	7	8	9	10
Abdominal discomfort										
0	1	2	3	4	5	6	7	8	9	10
Inactivity										
0	1	2	3	4	5	6	7	8	9	10
Problems with concentration - compared to diagnosis										
0	1	2	3	4	5	6	7	8	9	10
Night sweats										
0	1	2	3	4	5	6	7	8	9	10
Itching (pruritus)										
0	1	2	3	4	5	6	7	8	9	10
Bone pain (diffuse, not joint pain or arthritis)										
0	1	2	3	4	5	6	7	8	9	10
Unintentional weight loss during last 6 months										
0	1	2	3	4	5	6	7	8	9	10
(ABSENT)							(WORST IMAGINABLE)			

Fever (> 37.8°C or 100°F)										
0	1	2	3	4	5	6	7	8	9	10
(ABSENT)							(DAILY)			

To help you get a clear overall picture of how you are feeling, you can add up all your scores to calculate your Total Symptom Score.

TOTAL:

If you get side effects with any medication you are taking, talk to your doctor, pharmacist or nurse. This includes any possible side effects not listed in the information leaflet that comes in the pack. You can report side effects via the Yellow Card Scheme at <https://yellowcard.mhra.gov.uk/> (UK). By reporting side effects you can help provide more information on the safety of your medication.

DAY MONTH	01									
	SEPT									
96-100										
91-95										
86-90										
81-85										
76-80										
71-75										
66-70										
61-65										
56-60										
51-55										
46-50										
41-45										
36-40										
31-35										
26-30										
21-25										
16-20										
11-15										
6-10										
0-5										

TOTAL SYMPTOM SCORE

