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# RISK STRATIFICATION AND EARLY PROGRESSION PATTERNS IN MONOCLONAL GAMMOPATHY OF UNDETERMINED SIGNIFICANCE

## *A 10-YEAR SINGLE-CENTER EXPERIENCE FROM TUNISIA*

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## INTRODUCTION

Monoclonal Gammopathy of Undetermined Significance (MGUS) is a premalignant plasma cell disorder defined by:

- Serum monoclonal protein **< 30 g/L**
- Bone marrow plasma cells **< 10%**
- Absence of **CRAB / SLiM criteria** (IMWG guidelines)

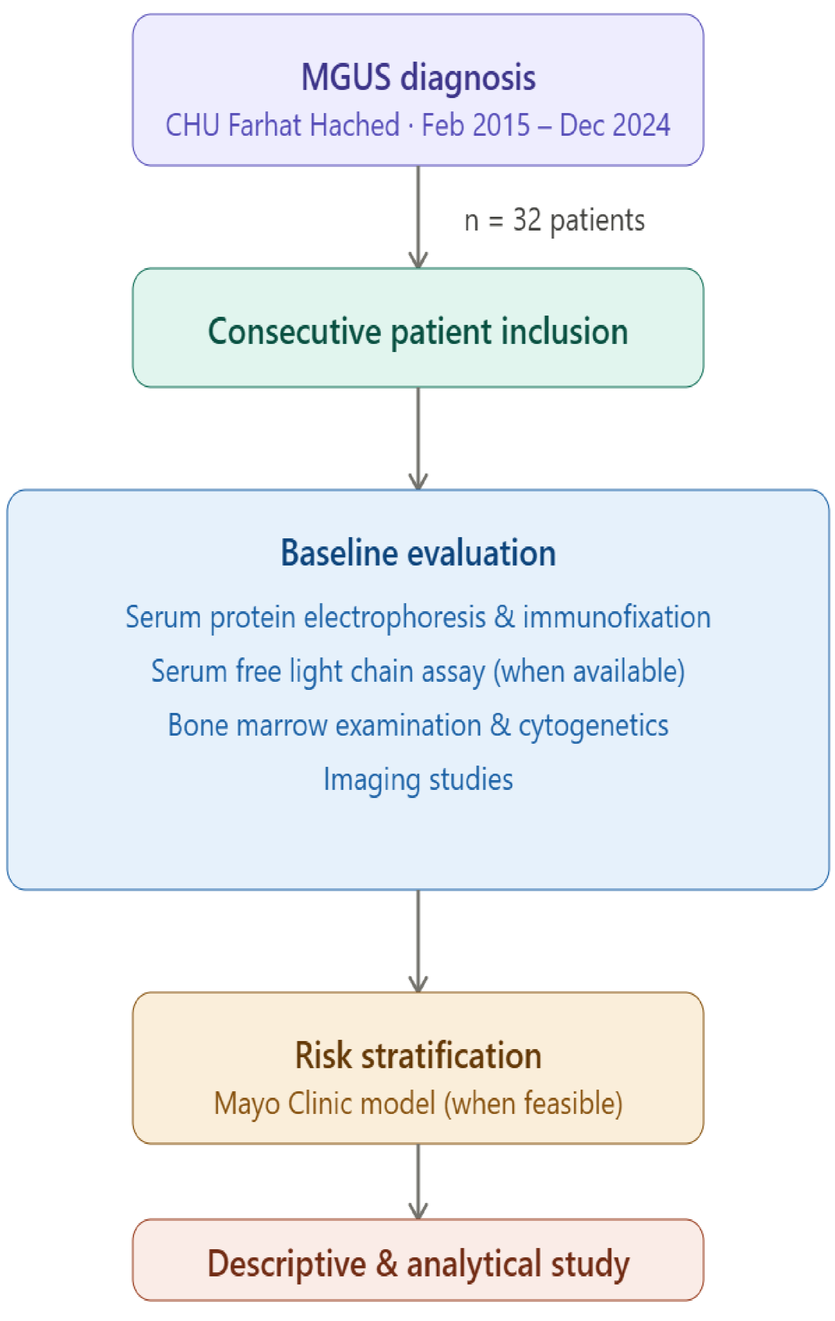
Despite its indolent course, MGUS carries a **lifelong risk of progression** to Multiple Myeloma (MM) or related plasma cell disorders, necessitating **risk-adapted surveillance**.

## AIMS

•Evaluate baseline clinical and biological parameters associated with **early progression** in MGUS

•Assess the applicability of **risk stratification models** in a real-world single-center cohort

## METHODS




## RESULTS

| Median age | Incidental detection | M-protein detected | Progression to MM | sFLC tested |
|---|---|---|---|---|
| 70 years (34–103) | 56.3% of cases | 81.3% predominantly IgG | 6.3% 2 / 32 patients | 22% no abnormal κ/λ ratio |

**Table 1. Baseline characteristics and outcomes in MGUS/MGUS-like patients**

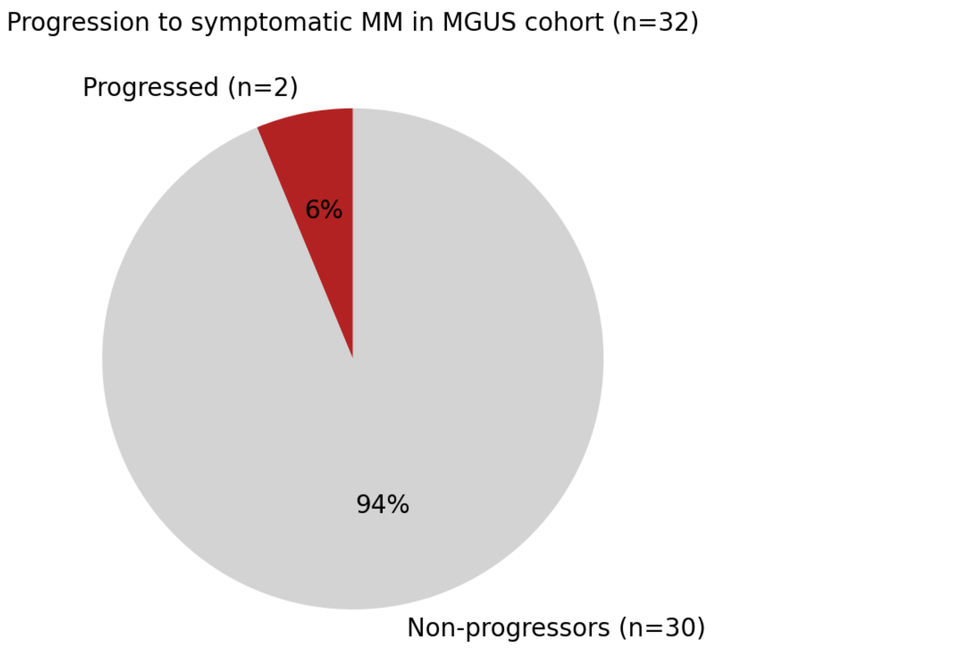



**Figure 1. Progression to symptomatic MM in MGUS cohort**

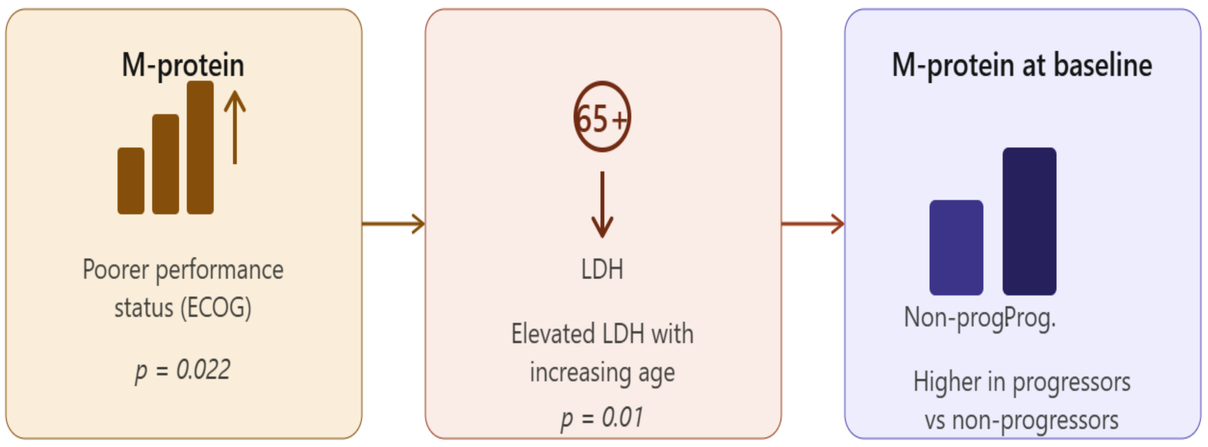



**Figure2. Laboratory and clinical correlations in MGUS cohort**

## CONCLUSION

- MGUS followed an overall indolent course, with early progression occurring in a minority of patients.
- These findings highlight the importance of systematic baseline risk stratification and structured long-term follow-up to enable early detection of malignant transformation, particularly in resource-limited settings