



Systemic mastocytosis (SM) is a rare form of mast cell disorder characterised by abnormal proliferation and activation of mast cells^{1,2}

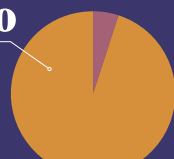
~1 in 10,000 people have SM^{3*}



Disease onset commonly occurs at 20–50 years of age¹



SM accounts for >95% of adult mastocytosis cases⁴



◀ Mast cell mediator symptoms prominent

Organopathy prominent ▶

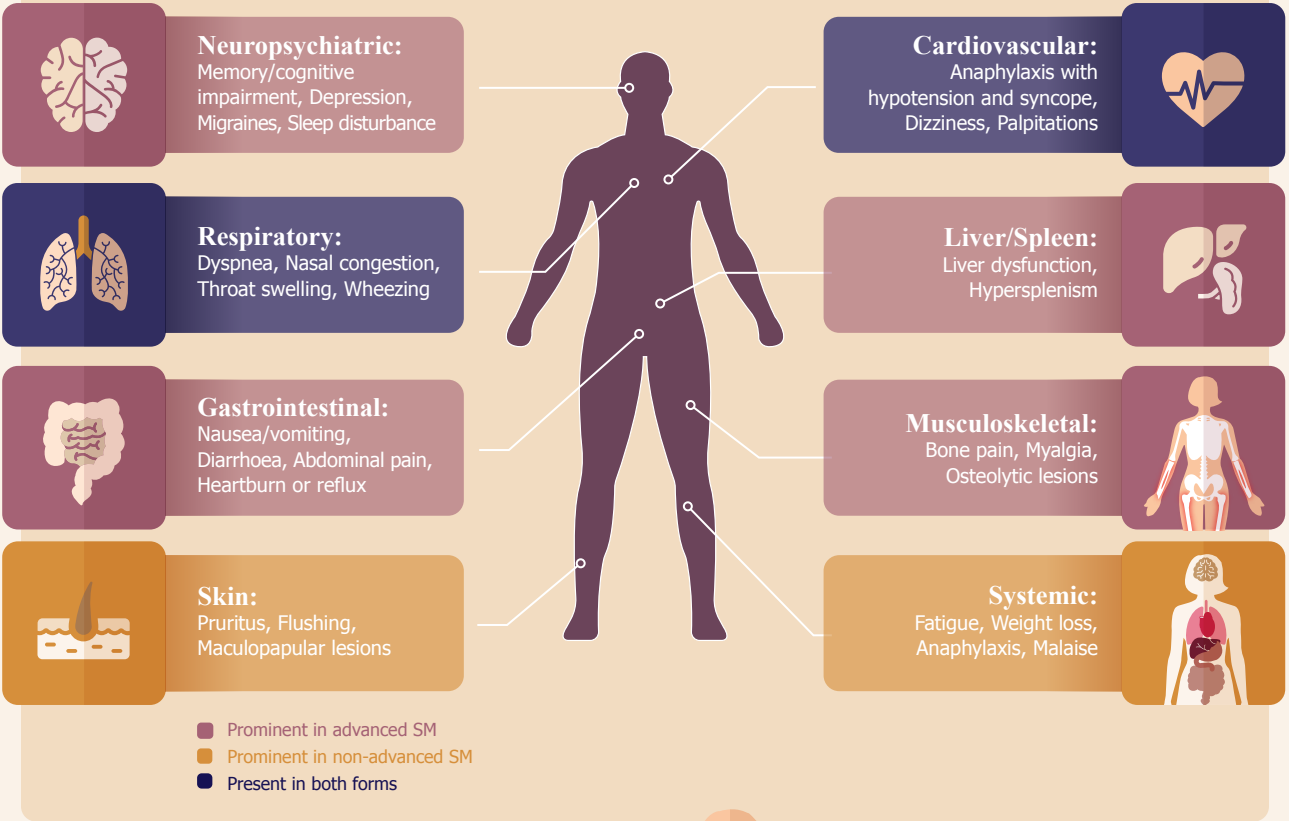
Non-Advanced SM accounts for ~90% of SM cases^{1,2} predominantly indolent SM (ISM)

Advanced SM accounts for ~10% of SM cases^{1,2} aggressive SM (ASM), mast cell leukaemia (MCL), associated haematological neoplasm (AHN)

The clinical presentation often involves one or more extracutaneous sites (as well as skin involvement):^{1,2,5,6}

Not an inclusive list of all symptoms.

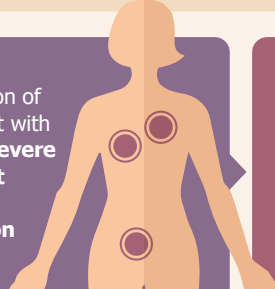
The frequency and intensity of any given symptom may vary from person to person.




Due to the heterogeneity and unpredictability of SM symptoms, early diagnosis is challenging¹

Median time from onset to diagnosis ~7 years^{5†}

Clinical suspicion of SM should start with recognising severe and recurrent instances of these common symptoms¹



A combination of diagnostic tests, mast cell examination, high-sensitivity KIT D816V assay or serum tryptase test, is recommended to help confirm the SM suspicion⁷



To learn more about the real clinical impact of SM, visit: www.systemicmastocytosis-hcp.com