

Humber and North Yorkshire Integrated Care Board (ICB)

Approved: March 2024 Next Review: March 2027

#### **Night sweats**

Nights sweats or excess sweating is a common cause for referral to haematology clinic, but night sweats as the sole presenting feature of lymphoma (or myeloma) without palpable lymphadenopathy, weight loss or blood count abnormalities are unusual. Sweats in haematological malignancies are drenching, often occur at night, and affect the whole body.

## Other causes of excess Sweating

- Infections e.g. tuberculosis, endocarditis, osteomyelitis, abscesses, tropical infections
- Other malignancy e.g. lung cancer
- Endocrine issues o Hypoglycaemia o Phaeochromocytoma o Hyperthyroidism o Menopause o Carcinoid
- Autoimmune diseases
- Neurological diseases e.g. autonomic dysfunction, Parkinson's
- Medications e.g. antidepressants, hormones e.g. tamoxifen check BNF
- Withdrawal syndromes e.g. drugs, alcohol
- Acid reflux
- Idiopathic

## **History and examination**

Think about above causes and rule out systematically. Examine for lymphadenopathy and splenomegaly. Ask about travel.

# Suggested investigations

- Full blood count and film
- · Renal and liver function tests
- Inflammatory markers
- Calcium
- TSH
- Glucose or HBA1c
- Hormonal profile as appropriate
- HIV
- Immunoglobulins and serum protein electrophoresis
- Chest radiograph
- Autoimmune screen if history

**Refer to haematology IF** there is associated weight loss, palpable lymphadenopathy or splenomegaly, or relevant blood test abnormalities (eg cytopenias with normal haematinics, paraprotein).

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#### References

- NICE Haematological cancers recognition and referral (2021) <u>Haematological</u> cancers recognition and referral | Health topics A to Z | CKS | NICE
- Common causes of night sweats: A guide to identification and investigation | The BMJ
- Patients who report night sweats (bmj.com)