

# Basics of Graft-Versus-Host Disease

Graft-versus-host disease (GVHD) is a common and serious side effect of an allogeneic transplant. An allogeneic transplant uses blood-forming cells donated by someone else. GVHD can range from mild to severe.

## THIS FACT SHEET TELLS YOU:

- The main types of GVHD
- How to lower your risk of getting GVHD
- Signs and symptoms of GVHD
- Treatment for GVHD

## WHAT IS GVHD?

GVHD happens because of differences between the donated cells (graft) and your body's cells (host). Your new cells from your donor (graft) might see your body's cells (host) as different and attack them.

### Types of GVHD:

- **Acute** – Typically develops in the early weeks and months after transplant. It's called Late Acute GVHD when it develops 3 or more months after transplant.
- **Chronic** – Typically develops within 1 year of transplant but can happen later. It's called Overlap Chronic GVHD when signs and symptoms of chronic and acute GVHD appear together.

## HOW TO LOWER YOUR RISK

1. **Take your medicine.** Your doctor will give you medicine to help prevent GVHD. Take it as directed, even if you feel healthy. Call your doctor right away if you can't take the medicine for any reason.
2. **Watch for early warning signs and tell your doctor.** Early treatment of GVHD, infections and other side effects from treatment can help you recover faster.

3. **Protect yourself from the sun.** Exposing yourself to the sun's ultraviolet (UV) rays increases your risk of getting GVHD. To limit your exposure to the sun:
  - Avoid the sun as much as possible.
  - Use an umbrella when you're in the sun.
  - Wear a hat, sunglasses, long sleeves and pants when you go outside.
  - Apply SPF 50 or higher sunscreen on any skin that is not covered. You can also wear SPF clothing.

Even on a cool, cloudy day the sun is just as harmful as on a hot, bright day.

## WATCH FOR SIGNS OF GVHD

Tell your doctor right away if you have any of these signs or symptoms.

### Acute GVHD

- **Skin**
  - Very faint to severe sunburn-like rashes
  - Blisters
  - Redness
- **Stomach**
  - Nausea or vomiting
  - Loss of appetite
  - Weight loss
- **Intestines**
  - Diarrhea
  - Belly pain or cramping
  - Feeling bloated, or full of gas
  - Blood in your stool
- **Liver**
  - Jaundice (your skin or eyes look yellow)
  - Dark (tea-colored) urine
  - Pain in the upper part of your belly
  - Swelling in your legs or belly

## Chronic GVHD

- **Skin and nails**
  - Skin thickening or rash
  - Nail changes
  - Unusual hair loss or thinning
  - Itchy skin
- **Joints and muscles**
  - Arthritis-like symptoms (pain and stiffness)
  - Muscle pain, cramps or weakness
  - Joints don't move properly
- **Eyes**
  - Dry or teary eyes
  - Redness or irritation
  - Pain or sensitivity to light
  - Blurred vision
- **Mouth**
  - Trouble opening your mouth
  - Sores, irritation or pain
  - Chapped lips or dry mouth
  - Difficulty swallowing or sore throat
- **Lungs**
  - Feeling winded or short winded
  - Less able to exercise
  - Trouble breathing or shortness of breath
  - Cough
- **Stomach and intestines**
  - Nausea, vomiting or diarrhea
  - Weight loss
  - Belly pain or cramping
- **Genitals**
  - Irritation, dryness or itching
  - Redness, sores, swelling or burning
  - Dryness or pain with sexual activity

Many of the early warning signs for GVHD could also be caused by infection or another side effect. Tell your doctor right away if you notice any changes in your body.

### For Parents

- Look for early warning signs of chronic GVHD every day.
- Ask your child specific questions about any changes or problems he or she may be having.
- Tell your child to tell you right away about any changes in their body.

## TREATMENT FOR GVHD

- Starting treatment for GVHD **early** leads to the best results.
- Treatment typically includes medicines that hold back your immune system, also called immunosuppressants. These medicines help your new donor cells accept your body.
- Many times, the first treatment is a steroid, like prednisone.
- During treatment for GVHD you may have limitations on what you can do, even if your transplant was more than 1 year ago. For example, you may need to avoid yard work and large crowds. Ask your transplant team what you may need to avoid.
- Follow your doctor's instructions carefully when taking GVHD medicines. If you can't take them for any reason, tell your doctor.
- Treatment for GVHD takes time. You may need to take GVHD medicine for many months. It can take time to find the best type and dose of medicine with the fewest side effects to treat your GVHD.

## QUESTIONS TO ASK YOUR DOCTOR

- What is my risk for GVHD after transplant?
- Is there anything I can do to lower my risk for GVHD?
- What signs and symptoms should I watch for?

## RESOURCES FOR YOU

Talk to someone who can help:

- Contact a BMT Patient Navigator:
  - Call: 1 (888) 999-6743
  - Email: [patientinfo@nmdp.org](mailto:patientinfo@nmdp.org)
  - Visit: [BeTheMatch.org/one-on-one](https://www.bethematch.org/one-on-one)

Order free resources at [BeTheMatch.org/request](https://www.bethematch.org/request).

Here are some you might find helpful:

- BOOKLET: *Allogeneic Transplant Process*
- FACT SHEET: *Coping with Chronic GVHD*
- VIDEO: *Basics of BMT*



Every individual's medical situation, transplant experience, and recovery is unique. You should always consult with your own transplant team or family doctor regarding your situation. This information is not intended to replace, and should not replace, a doctor's medical judgment or advice.