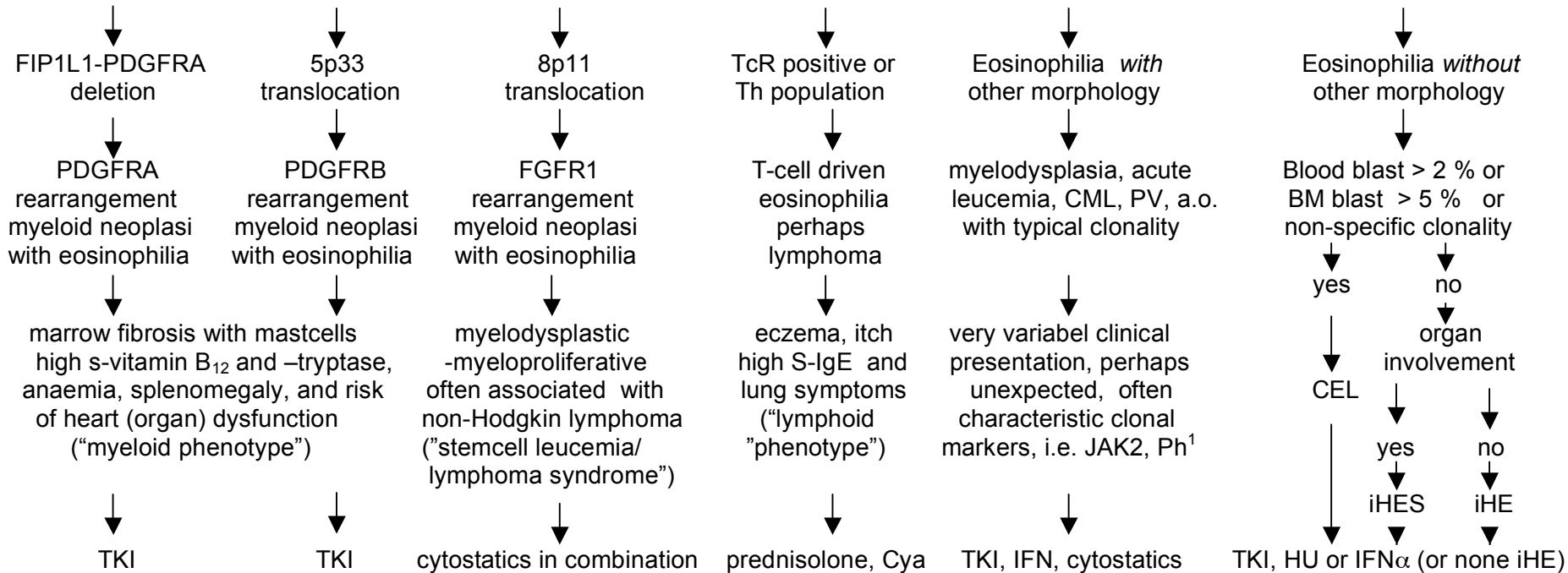


If none of the differential-diagnosis above is demonstrated following anamnesis, clinical examination and diagnostic tests (microbiological, bloodsamples, tissuebiopsies, imaging) then measure s-tryptase and perform bone marrow examination including morphology, FISH, RT-PCR, flow cytometry and / or karyotype for clonality and examine for



Algorithm for eosinophilia. Abbreviations and comments. BM bone marrow; CEL chronic eosinophilic leukaemia; CML chronic myeloid leukaemia; CyA cyclosporine A; FGFR fibroblast growth factor receptor; iHE idiopathic hypereosinophilia; iHES idiopathic hypereosinophilic syndrome; HU hydroxyurea; IFN α interferon- α 2a or 2b; PB peripheral blood; PDGFR platelet derived growth factor A or B; PV polycythemia vera; TKI tyrosine kinase inhibitor; s serum. When blasts > 20 % in blood or bone marrow: acute leukaemia. Bjerrum, Pelliniemi & Wadenvik / NMPD 2009.