

Guidelines for GP referral and further investigations of patients with Night sweats

**Drenching night sweats
(that soak clothes and bedding)**



- **History to see possible underlying causes**
- **Clinical examination for lymphadenopathy and/or splenomegaly**
- **Bloods – FBC, blood film, ESR, CRP, TFTs, glucose, virology (EBV/CMV, HIV, Hep B and C)**



B symptoms *(weight loss >10% over 6 months, drenching night sweats, fever)
Lymphadenopathy or splenomegaly
Abnormal haematological indices (needs to discuss with on call Haematologist if urgent admission needed)
Paraproteinemia



Urgent 2 WW referral to Haematology



Patient unwell and abnormal FBC



Contact Haematology on call



If night sweats only, otherwise well with normal FBC
Referral not required
To rule out other systemic causes

Causes:

- Infection
- Menopause, Breast feeding
- Anxiety
- Endocrine – Hyperthyroid, nocturnal hypoglycemia in diabetes, acromegaly, pheochromocytoma, Obstructive sleep apnoea
- Connective tissue disease
- Neurology – Parkinsonism, neuropathies
- Medications – Antipsychotics, SSRIs, Tramadol, Hormonal agents (Tamoxifen or GNRH analogue), Alcohol excess or withdrawal, Haematological malignancies