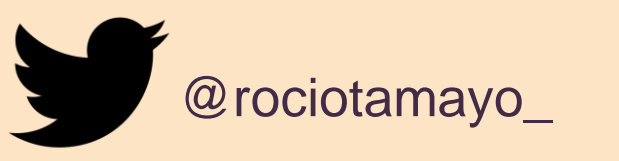


ALLOGENEIC HAEMATOPOIETIC CELL TRANSPLANTATION IN PATIENTS AGED <60 YEARS WITH ACUTE MYELOID LEUKEMIA

R. TAMAYO BERMEJO, C. ORTEGA DE LA CRUZ, J.C. DEL RÍO VALENCIA, I.M. MUÑOZ CASTILLO.
REGIONAL UNIVERSITY HOSPITAL OF MALAGA, PHARMACY DEPARTMENT, MALAGA, SPAIN



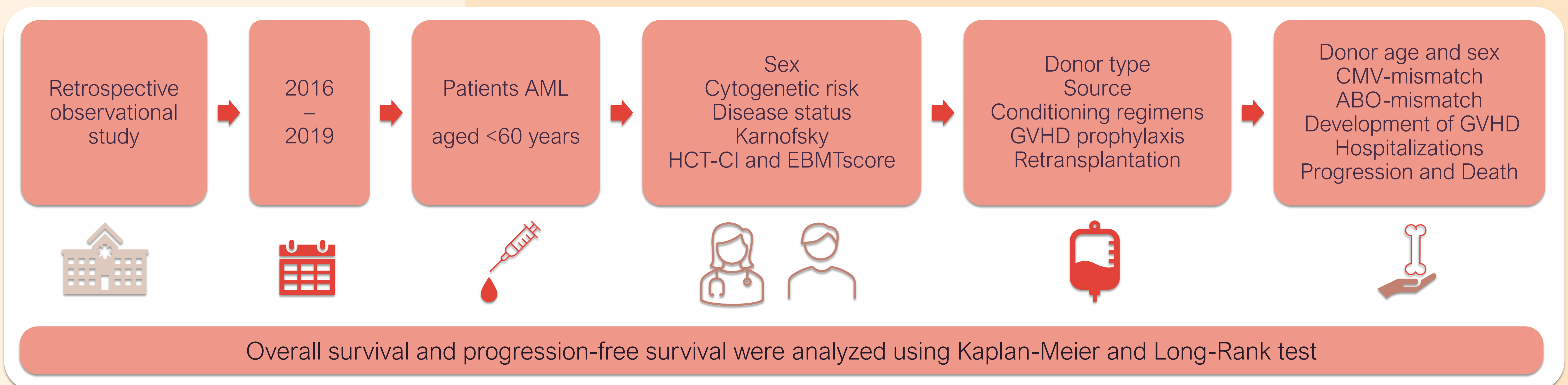
BACKGROUND AND IMPORTANCE

Allogeneic hematopoietic cell transplantation is a potentially curative therapeutic modality for acute myeloid leukemia, but it still carries high morbidity and mortality; there are limited data regarding outcomes, so it is important to research its results, and the factors that influence them.

OBJECTIVES

To assess the survival of allo-HCT in AML patients age <60 years, describe its characteristics, and identify factors that are related to the best outcomes.

MATERIAL AND METHODS

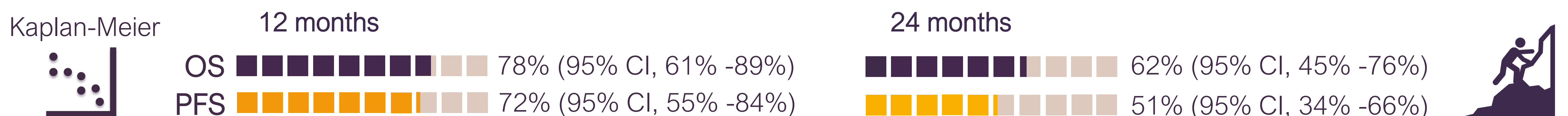


RESULTS

37 patients
Mean age 45 years
65% women

51% intermediate-risk, 43% high-risk
70% in first complete remission
92% patients KPS score over 90%
54% HCT-CI 0-2, 81% EBMTscore ≤4
65% related donor (43% HLA-identical and 22% haploidentical)
35% unrelated donor (22% HLA-identical, 11% HLA 9/10, and 3% HLA 8/10)
70% allogeneic peripheral blood stem cell transplantation

65% reduced-intensity conditioning
16% retransplantation
Most donors were men >30 years
38% received posttransplantation treatment with cyclophosphamide, tacrolimus, and mycophenolate mofetil
19% CMV-mismatch (patient pos/ donor neg)
57% ABO-compatible
54% development chronic GVHD and 40% acute GVHD
43% didn't require related hospitalization



Median PFS and OS were not reached. The median follow-up for PFS was 33 months [1-69] and 34 months [1-69] for OS. PFS was significantly higher in patients in 1st CR, EBMTscore ≤4, and lower-risk.

CONCLUSION

Patients undergoing allo-HCT show encouraging survival, although more extended follow-up is required to define more accurately their prognosis.

