Impact of Consolidation Chemotherapy Intensity Before Allogeneic Hematopoietic Stem Cell Transplantation in Elderly Patients With Acute Myeloid Leukemia

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INTRODUCTION

Allogeneic hematopoietic stem cell transplant (SCT) remains the best curative treatment in adult acute myeloid leukemia (AML). Intensive induction chemotherapy allows elderly patients to achieve complete remission rates (CR) of around 60–70%. To date, there is no consensus concerning the consolidation treatment of AML in elderly patients in first CR, before allogeneic SCT.

METHOD

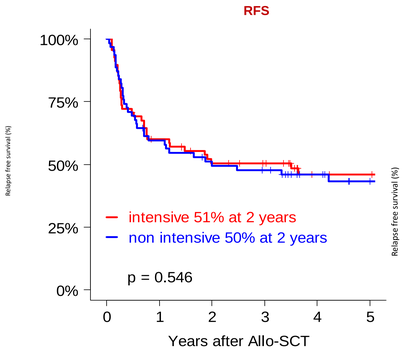
- Retrospective study between 2007-2017
- 130 AML patients ≥ 60 years,
- CR1 after intensive induction
- Consolidation:
  - ➢ 68 intensive
  - ➢ 62 non intensive
- receiving allogeneic SCT

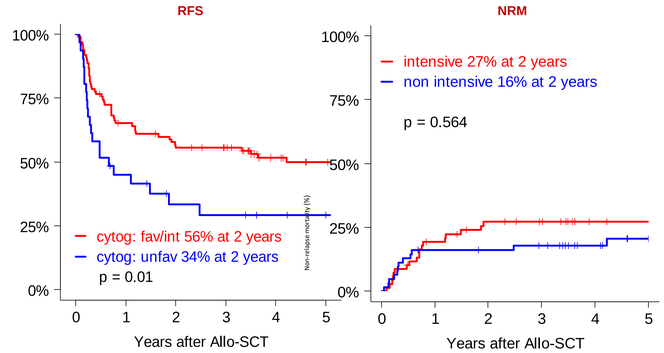
Our aim was to evaluate relapse-free survival (RFS) rates.

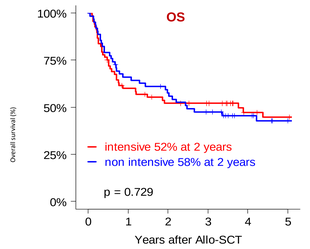
	All	Intensive	Non Intensive
	n=130	n [%]	n [%]
Age at transplant			
	64 [60-72]	63 [60-72]	66 [60-72]
AML			
De novo	102 (78)	54 (79)	48 (77)
Secondary	28 (22)	14 (21)	14 (23)
ELN 2017			
Fav	8 (6)	7 (10)	1 (2)
Inter	49 (38)	29 (43)	20 (32)
Adverse	39 (30)	21 (31)	18 (29)
missing data	34 (26)	11 (16)	23 (37)
Time diagnostic / transplant			
< 6 mois	95 (73)	48 (71)	47 (76)
≥ 6 mois	35 (27)	20 (29)	15 (24)
Donor			
Sibling	48 (37)	26 (38)	22 (35)
MUD/MMUD	55 (42)	26 (38)	29 (47)
CB	10 (8)	5 (7)	5 (8)

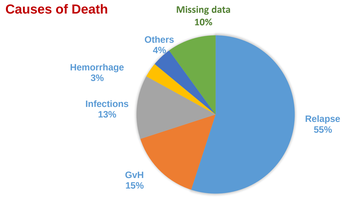
RESULTS

Median follow up: 52,2 mo









CONCLUSIONS

✓No benefit intensive *vs* non-intensive consolidations before Allo SCT in adults > 60y

✓Retrospective study:
- Missing data : 30%patients w/o molecular analysis
- No MRD

✓Molecular profile; helps to determine the likelihood of doing well with chemotherapy and/or transplant for older adult

✓New drugs has strongly modified the landscape of AML therapeutic

✓Development of NMAC Haplo-SCT (with PBSC and PT-Cy) is very well tolerated and allowed long-term survival in AML or MDS

✓Powerful tools for maintenance therapy after allo-HSCT

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CONTACT INFORMATION

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