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OUTCOMES OF PATIENTS WITH ACUTE LYMPHOBLASTIC LEUKEMIA TREATED AT A SAFETY-NET HOSPITAL

A. Velala[1], K. Athipatla[1], A. Lingam MD[2], B. Ghabach MD[2,3], K. Narra MD[2,3]
[1]Carroll Medical Academy, Southlake TX
[2]John Peter Smith Hospital Network, Fort Worth TX
[3]Burnett School of Medicine, Texas Christian University, Fort Worth TX

INTRODUCTION

- Acute lymphoblastic leukemia (ALL) has a 5-year overall survival (OS) of 89% in children, 61% in Adolescent and Young Adults (AYA), and 20-40% in adults (≥40 years).
- Care and treatment regimens for ALL are complex, especially in a safety-net setting.

OBJECTIVE

• We evaluated outcomes of ALL patients at John Peter Smith Hospital (JPS), a safety-net hospital in North Texas.

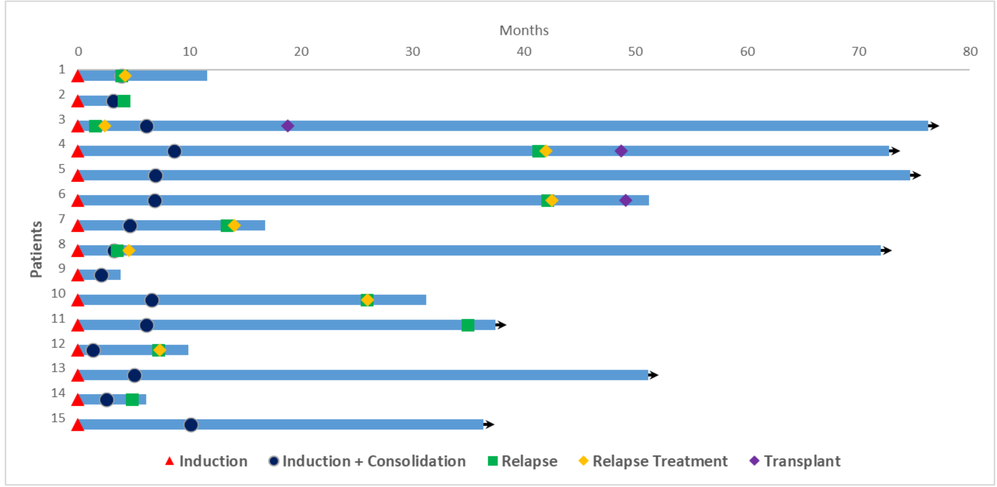
METHOD

- JPS is a 573-bed county hospital, that offers inpatient and outpatient services for ALL patients but does not offer stem cell transplant (SCT) and cellular therapies. A group of 5 general hematology-oncology physicians manage care of ALL patients and patients with all other malignancies.
- Retrospective chart-review of ALL patients diagnosed from 1/1/2017 to 12/31/2021 with full or part treatment at JPS. The last review date was 5/31/24.

RESULTS

- 15 patients: 8 males, 7 females
- Race/ethnicity: 10 Hispanic, 4 Black, 1 non-Hispanic White.
- Insurance status at diagnosis: **13 were uninsured**, 1 had Medicaid, and 1 had private insurance.
- Median age 42 (range 19-64): 5 in the AYA, 10 were adults.
- 3 were diagnosed with T-ALL, 4 patients had Philadelphia positive.
- 7 deaths: 4 within a year, 1 between 1-2 years, 1 between 2-3 years, 1 over 4 years. 8 patients are alive, follow-ups ranged between 3.0-6.3 years; 6 are without disease. 11 relapsed.
- 3 patients underwent allogeneic SCT, 2 of which are alive and 1 who died from complications within 60 days.
- 3/5 (60%) patients in the AYA group are alive without disease, while 5/10 (50%) adults are alive.

Swimmer plot showing individual ALL patients' journeys



CONCLUSIONS

- Despite resource limitations, the observed survival data at JPS is promising.
- Optimizing patient outcomes requires improved access to transplant services and clinical trials.
- By addressing these deficiencies, we can aim for enhanced care and survival rates, particularly in safety-net hospital settings.

REFERENCES

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CONTACT INFORMATION

Please contact the principal investigator, Dr. Kalyani Narra, with any questions at knarra@jpshealth.org.