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REAL-WORLD TREATMENT PATTERNS AND OUTCOME IN ACUTE LYMPHOBLASTIC LEUKEMIA(ALL) FROM WESTERN INDIA

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INTRODUCTION

There have been strides in ALL therapy and outcomes in the western world, yet the outcomes are quite heterogeneous and inferior in developing and low-and-middle-income countries (LMIC).

This is especially true in remote parts of the country and data is sparse from these areas where the most help is needed.

Very high treatment abandonment rates of ALL chemotherapy, close to 10-62% is reported from India

AIM

To study the **treatment patterns, adherence and outcome** of ALL therapy in Saurashtra part of Western India

Rates of **treatment abandonment** and reasons for it.

METHOD

Design: Retrospective analysis.

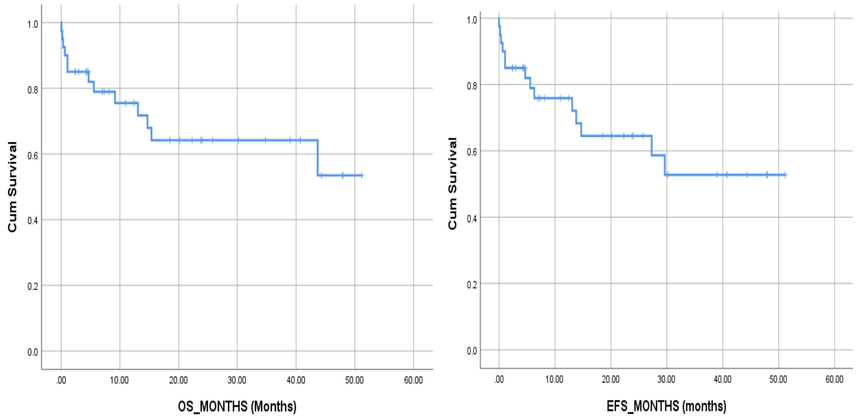
Patients: The study included newly diagnosed patients who presented between 2020-2024 and were initiated on induction chemotherapy for ALL.

Chemotherapy regimens:- BFM-90 in 29(72.5%) patients, BFM-95 in 2(5%), other regimes in 2(5%) and data not available for 7(17.5%) patients.

Main Outcome Measures: Overall survival (OS), event-free-survival(EFS), rates of abandonment of therapy.

RESULTS

- The study included **40 patients, 24(60%) males and 16(40%) females.**
- The median age of the study population was 25.5 years (range:9-72yrs).
- The most common subtype of ALL was B-ALL in 22(55%), followed by T-ALL in 8(20%), Ph-positive ALL in 7(17.5%), ETPALL in 2(5%) and one(2.5%) patient had B/Myeloid MPAL.
- There were five(12.5%) relapses at last follow up.
- **Treatment abandonment was seen in 12(30%)** patients, out of which three(7.5%) abandoned at first relapse.
- Overall, 10(25%) patients completed maintenance therapy and are on follow-up.
- Nine (22.5%) patients are currently on maintenance.
- **The most common reason for discontinuation** was a lack of financial support and **depletion of available family savings.**
- At the median follow-up of 12.8 months, median OS and EFS is not reached



There were **13(32.5%) deaths** at the time of last follow up, out of which **5(38.5%) deaths were due to discontinuation of therapy** in the first month itself.

CONCLUSIONS

There is a high rate of treatment abandonment even during the initial months of chemotherapy due to a lack of financial support, logistics, family support, and awareness of the curative potential of chemotherapy.

A multi-pronged approach including state support and counseling services are required to mitigate the above problems to improve adherence to chemotherapy

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