

All oral treatment in newly diagnosed acute myelogenous leukemia (AML) patients over 65 years: progression free survival and toxicity

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INTRODUCTION

AML is a lethal disease especially in those over 65 years old. Induction chemotherapy is toxic and neutropenic, and most patients die because of treatment complications.

AIM

To evaluate the role of oral treatment in the place of induction setting. The impact they have on progression free survival and toxicity profile.

METHOD

We included a small cohort of 20 patients diagnosed with AML without any genetic marker enabling targeting therapies. Patients were between 65 and 82 years old and 15 were males. They received a continuous Venetoclax 100 mg per day and an oral Azacitidine 300 mg per day for 14 days and 14 days rest, treatment continued till disease progression or a major toxicity. Bone marrow aspirations are performed every month to evaluate response.

CONCLUSIONS

Oral treatment seems to be an efficient treatment in newly diagnosed elderly AML patients demonstrating good response and toxicity profile.

RESULTS

The first aspiration performed demonstrated a partial response (PR) in 12 out of 20 (60%). The second aspiration demonstrated a complete morphologic response (CR) in 5 out of 20 (25%). After 6 months, CR was seen in 10 patients (50%) and PR in 6 patients (30%). 4 patients progressed within the first year of follow-up, one among them died after a severe neutropenia. Toxicity ranged between grades treated in the hospital in 4 patients only. All patients needed blood and platelets transfusion on several occasions. Pulmonary infection controlled with suitable treatment documented in 5 patients. PFS at the end of the first year was 80% (95% CI: 76.2-85.7)

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