

Improved treatments for chronic myeloid leukaemia have dramatically increased survival

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Survival for people diagnosed with [Chronic Myeloid Leukaemia](#) (CML) has risen by nearly half, with around 58 per cent of people surviving their disease for at least five years compared with only around 40 per cent in the late 1990s, according to a new report from the [National Cancer Intelligence Network](#) (NCIN), published today.

The improvements are largely down to a family of drugs called [Tyrosine Kinase Inhibitors](#) (TKIs) which have now become the standard treatment for the disease. The first of these was [imatinib](#) ([Glivec](#)), which was licensed in 2001.

[The Northern and Yorkshire Cancer Registry and Information Service](#) (NYCRIS), on behalf of the NCIN Haematology Site Specific Clinical

Reference Group (SSCRG), looked at the rates of people in England getting, dying from and surviving a range of different [blood cancers](#) between 1995 and 2008. And it is the first national study in England to look at survival for different types of leukaemia.

For patients diagnosed with CML, researchers found that the chance of surviving the disease for at least five years after diagnosis rose from 41 per cent to 57 per cent in men and from 38 per cent to 59 per cent in women between the late 1990s and the early 2000s.

CML is a relatively rare form of leukaemia that mostly affects older people, with around 700 cases diagnosed in the UK every year.

Dr Robin Ireland, chair of the SSCRG at the NCIN, said: "It's really exciting to see the enormous difference [new drugs](#) can make in treating cancer. And, as this new data shows, TKI's can be considered a revolutionary treatment for Chronic Myeloid Leukaemia.

"Basic research has given us a greater biological understanding of [cancer tumours](#), which has led to the development of successful targeted [cancer drugs](#) that are now the first line treatment for CML. TKIs target cancer cells by blocking the molecules they make, which stops them from multiplying. These drugs have completely changed the outlook for patients with this disease and it's the first example of our improved understanding of cell molecular biology leading to the design of a specific inhibitor of the disease."

Dr Steven Oliver, Haematological Cancer Epidemiology Lead at NYCRIS and lead author of the report, said: "This report shows that, although the number of people developing Chronic [Myeloid Leukaemia](#) hasn't changed much since 2001, survival from the disease has greatly improved.

"What's even more promising is that, in the last four years, second and third generations of these drugs have been developed. We believe more and more CML patients have been receiving TKI's and we'd predict that the improvements in survival should be even greater in the future."

Chris Carrigan, head of the National Cancer Intelligence Network (NCIN), said: "Being able to link data on the diagnosis, treatment and outcomes for cancer patients allows us to identify where improved [cancer](#) care is having an effect on peoples lives. The improvements in survival demonstrated here highlight the difference that effective treatments can make."

Provided by Cancer Research UK

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