

New treatment for chronic lymphatic leukaemia could replace chemotherapy

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Studies conducted at the Comprehensive Cancer Center at MedUni Vienna and Vienna General Hospital show that the drugs ibrutinib and idelalisib used in the targeted treatment of chronic lymphatic leukaemia can significantly prolong the survival time of high-risk patients. The average survival time of these patients is between one and two years when they receive standard treatment, whereas 80% of patients receiving the new treatment were still alive after two years. These results give us reason to hope that, in future, these two drugs could not only replace chemotherapy but even stem cell transplantation.

Both drugs are so-called "small molecules" and belong to the class of substances known as kinase inhibitors. They are used in targeted cancer [treatment](#), where they interrupt the signalling pathways of the cancer cells. Both substances inhibit cell growth and idelalisib additionally affects the cells' ability to metastasize. Over the course of the last two years, they have been separately tested in studies at MedUni Vienna and are now routinely available to patients.

Ulrich Jäger, Head of the Clinical Department of Haematology and Haemostatology at MedUni Vienna and Vienna General Hospital and member of the Comprehensive Cancer Center Vienna, explains: "We can regard the results of these studies as milestones. We have now started further studies to investigate the two substances in combination. In future, they might even replace chemotherapy and stem cell transplantation to some extent."

Model system

These results – and the use of kinase inhibitors in oncology per se – are the central topic of the Spring conference of the Austrian Society of Haematology and Medical Oncology (OeGHO), which is taking place in Vienna on 17 – 19 March. Jäger, who is also chairman of this conference, says: "In targeted therapy, blood cancers serve as a model system for many different types of cancer. Knowledge obtained from haematology is therefore of great interest to other oncologists."

The reason: Targeted treatment acts on specific molecular-biological properties of the cancer cell. Tissue samples have to be taken in order to determine these properties. Such samples must also be taken if follow-up tests are necessary during treatment. In the case of solid tumours, a surgical procedure is usually required to take a tissue sample and this is not only stressful to the patient but also carries a certain risk. Jäger: "In the case of haematological malignancies, we can obtain millions of cells

quickly, easily and cheaply by taking a blood sample or performing a bone marrow puncture and use these for testing."

About chronic lymphatic leukaemia

Chronic lymphatic leukaemia (CLL) is one of the two subtypes of lymphatic leukaemia. It is the commonest form of blood cancer and predominantly affects people over 60 years of age. In this age group, 20 people in every 100,000 are diagnosed with this condition every year. In concrete terms, this means that between 70 and 90 new patients per year are diagnosed at MedUni Vienna and Vienna General Hospital.

Approximately 10 to 15 percent of these will be high-risk patients. This is because of genetic changes in their [cancer](#) cells. With conventional treatment, the average survival time for this group of patients is between one and two years.

Provided by Medical University of Vienna

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