Immunosuppressant response predicts aplastic anemia survival

September 7 2017

(HealthDay)—Response to immunosuppressive therapy (IST) predicts

overall survival (OS) in aplastic anemia (AA), according to a study published online Aug. 29 in the *American Journal of Hematology*.

Prajwal Boddu, M.D., from the University of Texas M.D. Anderson Cancer Center in Houston, and colleagues analyzed outcomes of adults with AA sequentially treated with combinatorial anti-thymoglobulin-based IST regimens in frontline and relapsed/refractory (R/R) settings. Data were included for 126 patients, of which 95 were treatment-naive and 63 R/R.

The researchers found that OS was superior in IST responders. Shorter relapse-free survival (RFS) was seen with partial response to IST compared with complete response. Baseline platelet and lymphocyte count predicted IST response at three and six months, respectively. There were no significant differences in RFS or OS across various frontline IST regimens, although additional growth factor interventions led to faster count recovery. There was no correlation for marrow cellularity with peripheral-blood counts at three months, while dyspoietic changes were seen in cytomorphological assessment in all non-responders with hypercellular-marrow indices. Salvage IST response was dependent on prior response to ATG (46 versus 0 percent for prior versus primary responders). There was no survival difference between IST and allogeneic stem cell transplant groups in the R/R setting; there was a trend toward superior OS in the former.

"Transplant benefits in the R/R setting may be underrealized due to transplant-related mortality," the authors write.

More information: Abstract
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