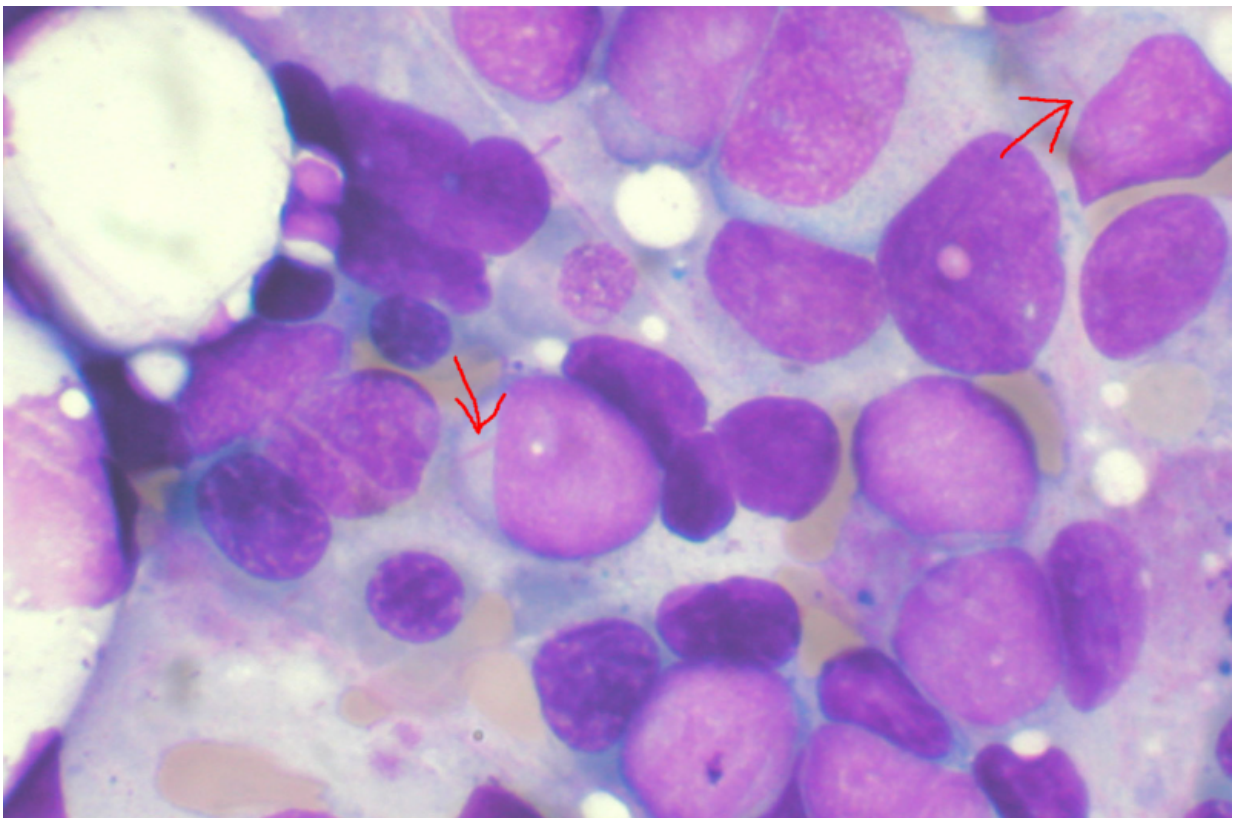


Treatment-free remission of chronic myeloid leukemia is possible following second-line nilotinib

February 19 2018



Bone marrow aspirate showing acute myeloid leukemia. Several blasts have Auer rods. Credit: Wikipedia

Treatment-free remission seems to be achievable in patients with chronic

myeloid leukemia (CML) who have achieved sustained deep molecular response (DMR) after discontinuation of second-line nilotinib therapy. Results from a Phase 2, open-label study are published in *Annals of Internal Medicine*.

Tyrosine kinase inhibitors (TKIs), such as imatinib, nilotinib, dasatinib, and bosutinib, have dramatically improved outcomes for [patients](#) with CML. Treatment-free [remission](#), or stopping TKI therapy without loss of response, is an emerging treatment goal for patients with CML in chronic phase. Potential benefits of treatment-free remission include relief of treatment side effects, reduced risk for long-term TKI toxicity, and the ability to plan a family. In the STIM1 (Stop Imatinib 1) trial, 38 percent of patients with sustained DMR while receiving long-term imatinib treatment had molecular recurrence-free survival at 5 years. These results confirm the feasibility of treatment-free remission after sustained DMR in patients receiving TKI.

Researchers from South Australian Health and Medical Research Institute studied 163 patients who had achieved sustained DMR after switching from imatinib to nilotinib to determine if they could maintain remission without TKI. They found that most of those patients maintained treatment-free remission for 48 weeks or longer. In addition, for those who do not achieve sustained DMR with imatinib, switching to nilotinib may enable more patients to become eligible for treatment-free remission.

More information: *Annals of Internal Medicine* (2018).
<http://annals.org/aim/article/doi/10.7326/M17-1094>

Provided by American College of Physicians

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