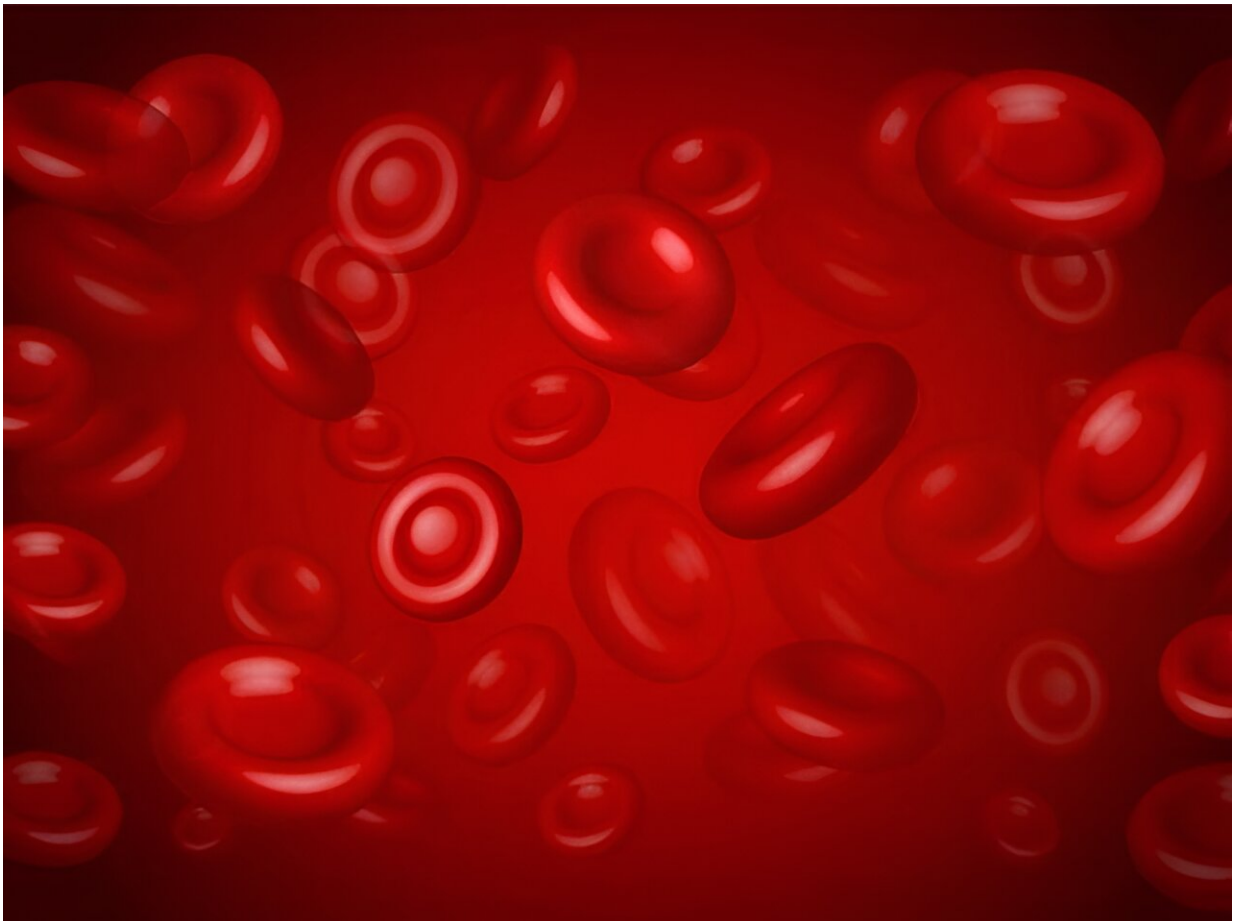


# Tolerable treatments lacking for higher-risk myelodysplastic syndromes

October 20 2023, by Elana Gotkine

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There is a clear, unmet need for tolerable treatments that can produce

durable remission among patients with higher-risk myelodysplastic syndromes (HR-MDS), according to a study published online Sept. 7 in *Leukemia & Lymphoma*.

Shanna Arnold Egloff, Ph.D., from HCA Healthcare in Nashville, Tennessee, and colleagues describe clinical presentation, patient-related factors, prognostic characteristics, treatment patterns, [clinical outcomes](#) and resource utilization among 200 patients with HR-MDS within a large U.S. community hospital network.

The researchers found that patients with HR-MDS treated in the community setting were elderly, with a median age of 76 years, and had a high comorbidity burden. First-line therapy was hypomethylating agent (HMA) monotherapy, lenalidomide, and venetoclax (20, 2, and 2 percent, respectively); the remaining patients were treated with supportive care. Within six months of diagnosis, 61 percent of the patients were hospitalized. The overall survival was 11.8 months.

Curative transplantation was rarely used, there was underutilization of HMA-based therapy, and responses were not durable. In addition, most of the patients became transfusion-dependent or transformed to [acute myeloid leukemia](#). Resource utilization was considerable and was highly linked with in-hospital days.

"Our experience confirms that newer approaches to HR-MDS will need to emphasize favorable logistics and coordination of care delivery as well as identify novel therapies with reduced toxicity in an elderly and high comorbidity population to enhance persistence with therapy," the authors write.

Several authors disclosed ties to HCA Healthcare.

**More information:** Shanna Arnold Egloff et al, Treatment patterns,

resource utilization and clinical outcomes in patients with higher risk myelodysplastic syndromes (MDS) in United States community practices, *Leukemia & Lymphoma* (2023). DOI: [10.1080/10428194.2023.2254429](https://doi.org/10.1080/10428194.2023.2254429)

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