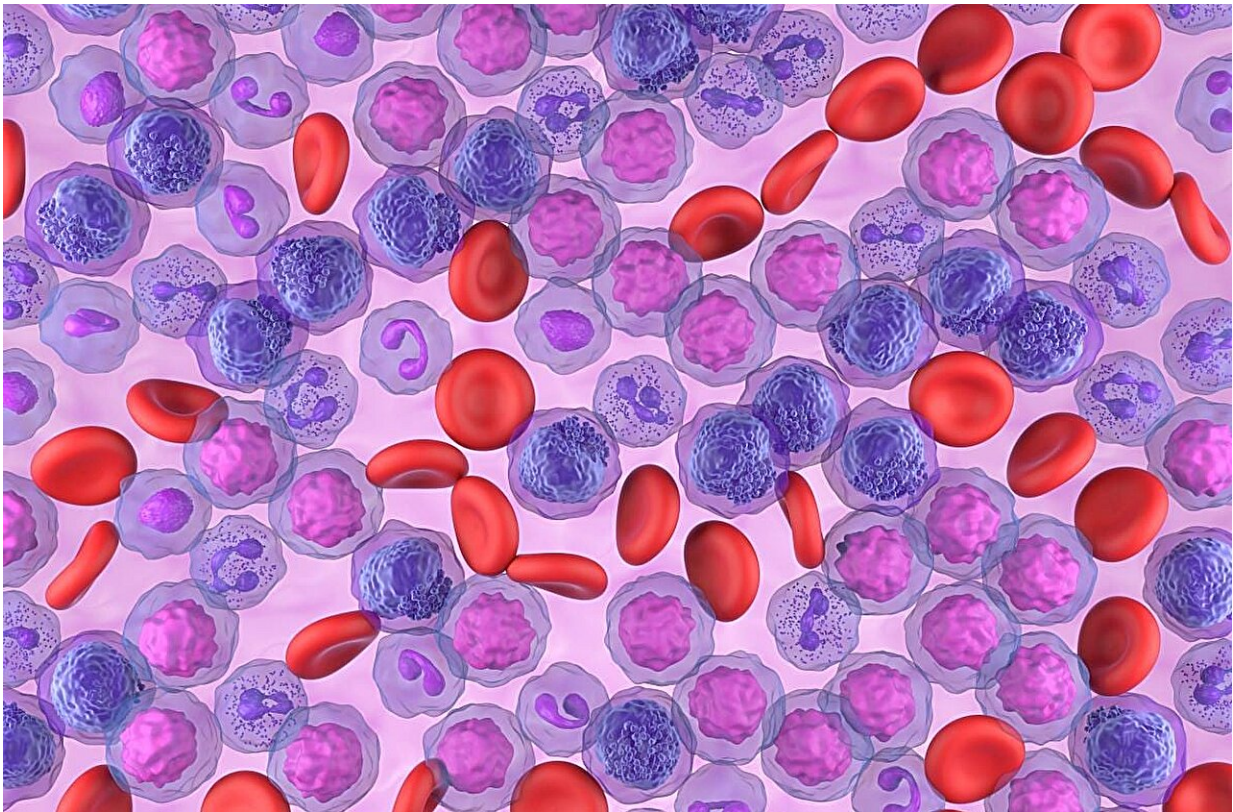


# Post-transplant cyclophosphamide GVHD prophylaxis beneficial in leukemia

June 24 2024, by Elana Gotkine

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For patients with acute myeloid leukemia (AML) undergoing allogeneic stem cell transplantation, posttransplant cyclophosphamide (PTCy) graft-versus-host-disease (GVHD) prophylaxis yields comparable relapse

incidence (RI) and significantly lower incidence of GVHD than conventional prophylaxis, according to a study published online June 10 in the *American Journal of Hematology*.

Arnon Nagler, M.D., from the Sheba Medical Center in Tel Hashomer, Israel, and colleagues compared RI post-unrelated allogeneic stem cell transplantation with PTCy versus conventional GVHD [prophylaxis](#) among 7,049 AML patients in remission (707 with PTCy; 6,342 with no PTCy).

The researchers found that RI did not differ significantly in the PTCy versus the no PTCy group. The PTCy group had significantly lower acute GVHD grades II to IV and III to IV versus the no-PTCy group (hazard ratios, 0.74 and 0.56, respectively), and total and extensive chronic GVHD (hazard ratios, 0.5 and 0.31, respectively). Compared with the no-PTCy group, the PTCy group had significantly lower nonrelapse mortality (hazard ratio, 0.67). Significantly higher GVHD-free, relapse-free survival was seen in the PTCy versus the no-PTCy group (hazard ratio, 0.69). The groups did not differ in terms of leukemia-free survival or overall survival.

"Clinically, these results are of importance, and although not direct proof, they may indicate that PTCy does not jeopardize the graft-versus-leukemia effect in the unrelated donor setting," the authors write.

**More information:** Arnon Nagler et al, Comparable relapse incidence after unrelated allogeneic stem cell transplantation with post-transplant cyclophosphamide versus conventional anti-graft versus host disease prophylaxis in patients with acute myeloid leukemia: A study on behalf of the Acute Leukemia Working Party of the European Society for Blood and Marrow Transplantation, *American Journal of Hematology* (2024). [DOI: 10.1002/ajh.27383](https://doi.org/10.1002/ajh.27383)

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Citation: Post-transplant cyclophosphamide GVHD prophylaxis beneficial in leukemia (2024, June 24) retrieved 28 June 2024 from <https://medicalxpress.com/news/2024-06-transplant-cyclophosphamide-gvhd-prophylaxis-beneficial.html>

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