

Impact of Refined Disease Risk Index after Single and Double Umbilical Cord Blood Transplantation in Adults with Hematological Malignancies

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Introduction

Refined disease risk index (DRI), based on disease type and disease status, divides large and heterogeneous cohort of patients with malignant disease undergoing allogeneic transplantation in 4 distinct subgroups with different outcomes. Unlike others available risk index, this tool includes also cytogenetics for acut e leukemia (AL).

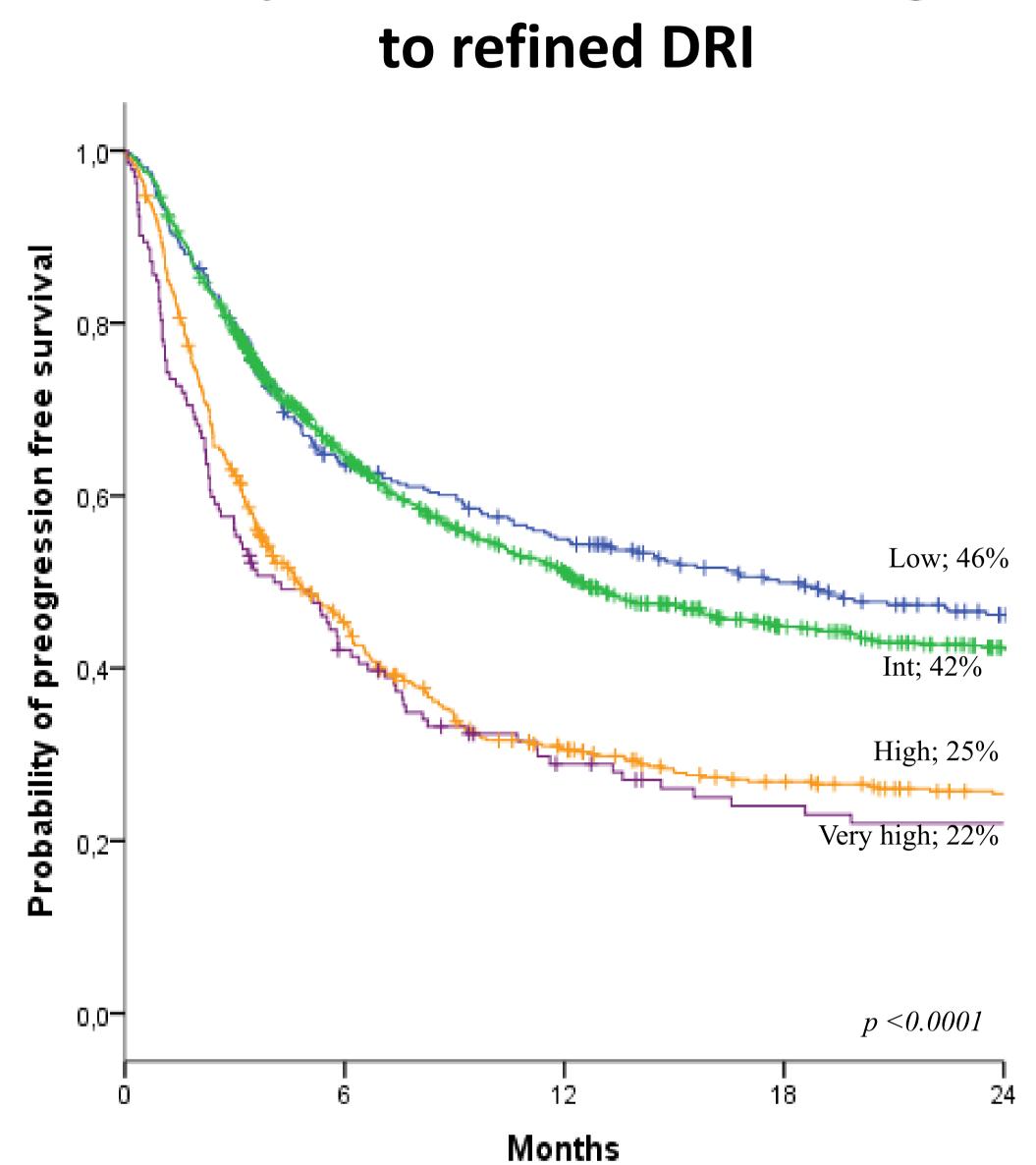
Patients and Methods

We retrospectively analyzed 2337 adults who underwent UCBT between 2004 and 2014 and had available data for DRI scoring.

Detients and Transmissis Characteristic	
Patients and Transplant Characteristics	n=2337 (range)
Diagnosis	4520
AL	1530
ALL	539
AML	991
favorable cytogenetics	88
intermediate cytogenetics	862
unfavorable cytogenetics	41
MDS	96
Intermediate cytogenetics	74
Adverse cytogenetics	22
MPD	156
LPD	467
MM	88
Median age at UCBT, yrs	42.6 (18-76) yrs
CMV	4.400
positive	1438
negative	801
Median TNC at collection (x107/Kg)	4.2 (0.4-13)
Type of UCBT	1125
Single Double	1125 1212
	1212
Conditioning regimen RIC	1206
Cy+Flu+TBI	852
Others	354
MAC	1130
Cy+Flu+TBI	250
Bu+Flu+TBI	359
Others	520
GVHD prophylaxis	
CsA+MMF	1419
Csa+Pred	369
Others	549

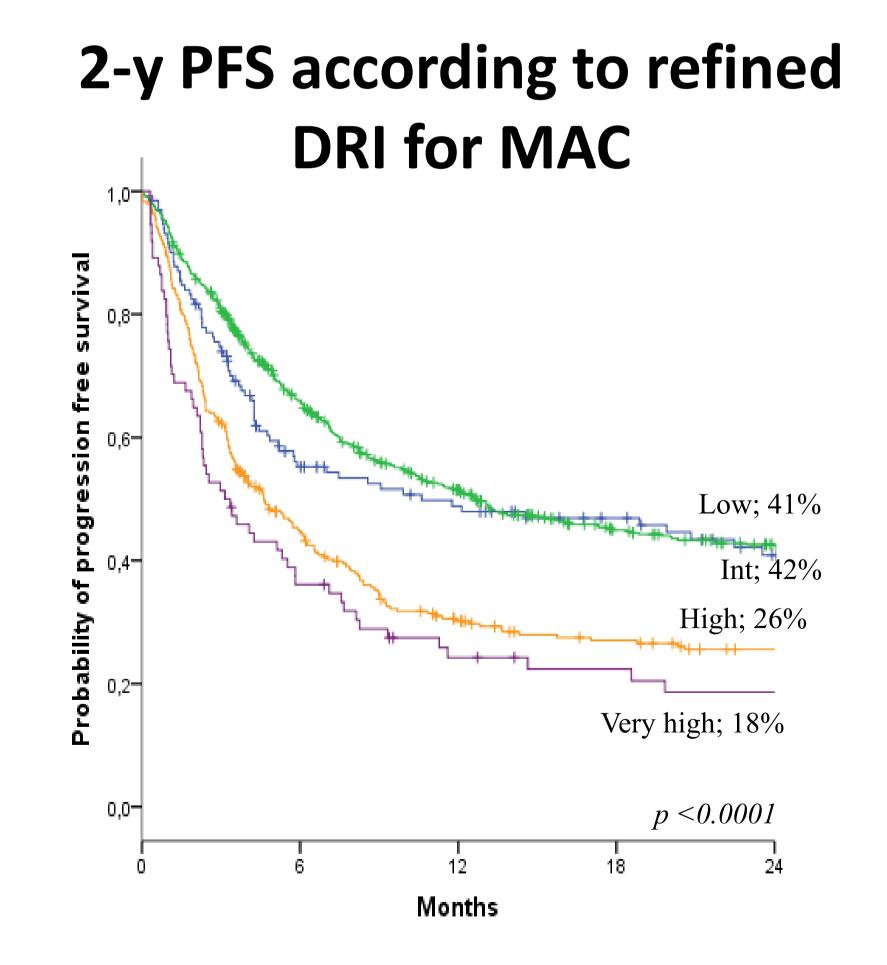
Disease/Stage	New DRI	2-y OS	2-y PFS
Hodgkin Lymphoma/CR			
CLL/CR			
Mantle cell lymphoma/CR			
Indolent NHL/CR	LOW	56+3%	46±3%
AML favorable cyto/CR	LOVV	JU+J/0	40±370
CLL/PR			
Indolent NHL/PR			
CML/chronic phase			
CML/advanced phase			
Mantle cell lymphoma/PR			
MPD/Any stage			
AML intermediate cyto/CR			
ALL/CR1			
T-cell NHL/CR			
MM/CR-VGPR-PR			
Aggressive NHL/CR	18.IT	40.20/	42.120/
Low-risk MDS adverse cyto/Early	INT	48 <u>+</u> 2%	42±2%
T-cell NHL/PR			
Low-risk MDS intermediate			
cyto/Advanced			
Indolent NHL/Advanced			
CLL/Advanced			
High-risk MDS intermediate cyto/Early			
Aggressive NHL/PR			
T-cell NHL/Advanced			
AML favorable cyto/Advanced			
HL/Advanced			
High-risk MDS intermediate			
cyto/Advanced			
High-risk MDS adverse cyto/Early			
ALL/CR2			
AML adverse cyto/CR	HIGH	31±2%	25±2%
Mantle cell lymphoma/Advanced			
High-risk MDS adverse cyto/Advanced			
MM/Advanced			
ALL/CR3			
Low-risk MDS adverse cyto/Advanced			
AML intermediate cyto/Advanced			
CML/blast phase			
ALL/Advanced	VERY		
Aggressive NHL/Advanced	HIGH	26 <u>+</u> 4%	22±4%
AML adverse cyto/Advanced			
Aivil adverse cyto/Advanced			

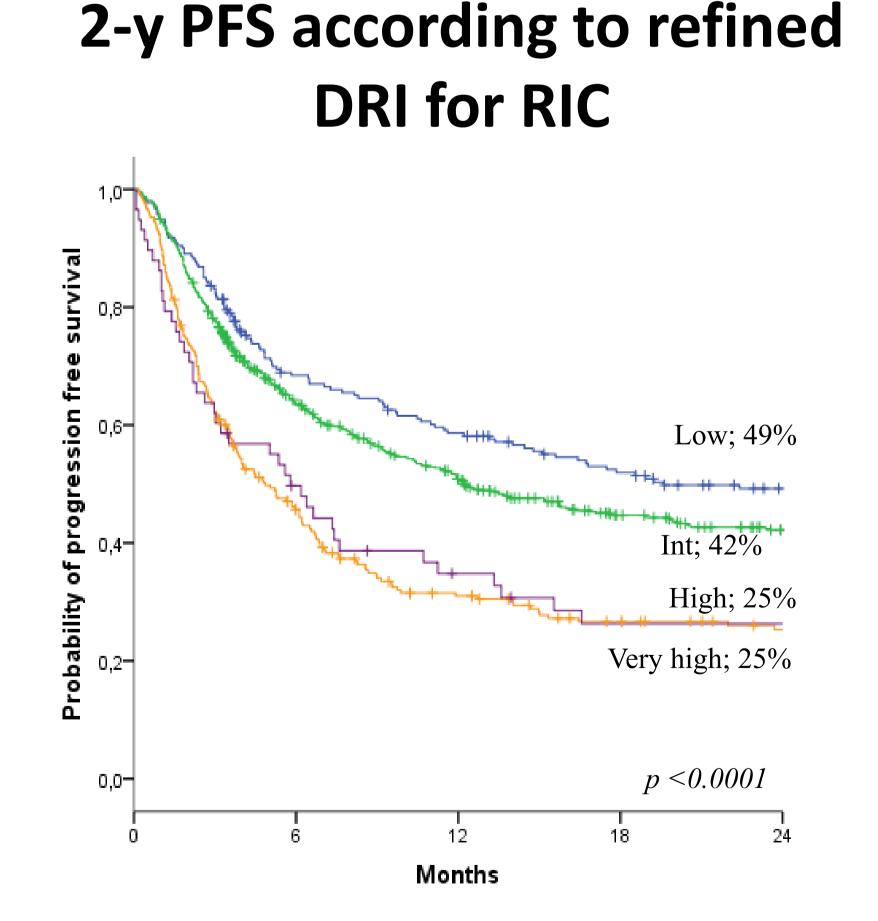
Results



2-y PFS stratified according

Multivariate Analysis					
	HR	95% CI	P value		
PFS					
ATG use	1.4	1.2-1.5	<0.0001		
CMV serology (positive vs negative)	1.2	1-1.4	0.008		
refined DRI (very high vs others)	2.2	1.6-3	<0.0001		
Median age at UCBT	1.3	1.2-1.5	<0.0001		
OS					
ATG use	1.5	1.3-1.7	<0.0001		
CMV serology (positive vs negative)	1.2	1.1-1.4	0.03		
refined DRI (very high vs others)	2.7	2-3.7	<0.001		
Median age at UCBT	1.4	1.2-1.6	<0.001		





Conclusions

Refined DRI represents a valid instrument to stratify patients undergoing UCBT in retrospective large cohort studies, in addition to other existing pre-transplant index. Our results confirm the prognostic value of refined DRI and support the use of this simple tool for prospective trials in the future.