Epidemiology ,diagnosis , clinical features and outcome of APL patients treated in Batna Against Cancer Center (Algeria).

7th INTERNATIONAL SYMPOSIUM ON ACUTE PROMYELOCYTIC SYMPOSIUM
Roma 24-27 sept 2017.

Aims

- This presentation is an over view of differents aspects of APL in our center but also in our country.

- Retrospective study over 8 years (january 2009-dec 2016).


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Methods

1. **Tools for diagnosis :**

- Cytologic study of blood and marrow samples : FAB classification
- In some time flow cytometry (hypogranular APL)
- No cytogenetic or molecular biology

2. **Treatment approch:**

- Blood transfusion+ FFP
- ATRA + Dexam
- CT :
  - Daunorubicine* in induction: 60 mg/m^2 d1-d3 + Cytarabine in high and intermediate risk
  - DNR + Cytarabine in consolidation for high and intermediate risk.
  - 6-mercaptopurine and Mtx in maintenance during 2 years + ATRA 15d/3months.

Results

1. Epidemiological aspects

During this period : 210 AML are diagnosed

- With 36 APL : 17,9 % (2/year)

- 31 adults :
  - Median age : 34,5 y (18-81y)
  - SR: 0,89 (17M/19F)

- 05 children or teenagers (5y-18y)

Clinical caracteristics

- The story of the pts:
  - One valvulopathy
  - One MDS
- Familial Kc :
  - 8 pts (22%) with 3 MH : ALL, AL , NHL
- Clinical description:
  - Hemorragic syndrom in 80%
  - Anemia in 98 %
  - Lymphadenopathy in 2 pts, bone pain in 4 pts

Biological features

- Hb m = 7,7 g/dl (5,7- 10,8)
- WBC m = 17,529 / (400-137 000)
  With 11 pts > 10, 000/
- PltC m = 27, 000 / (6000-75 000/)
  With 23 pts < 40 000/
- DIC : 09 pts (25%)

Risk stratification

Low risk	**4**	**11,2 %**
Intermediate risk	**21**	**58,3 %**
High risk	**11**	**30 , 5 %**

Sanz. Blood 2000.

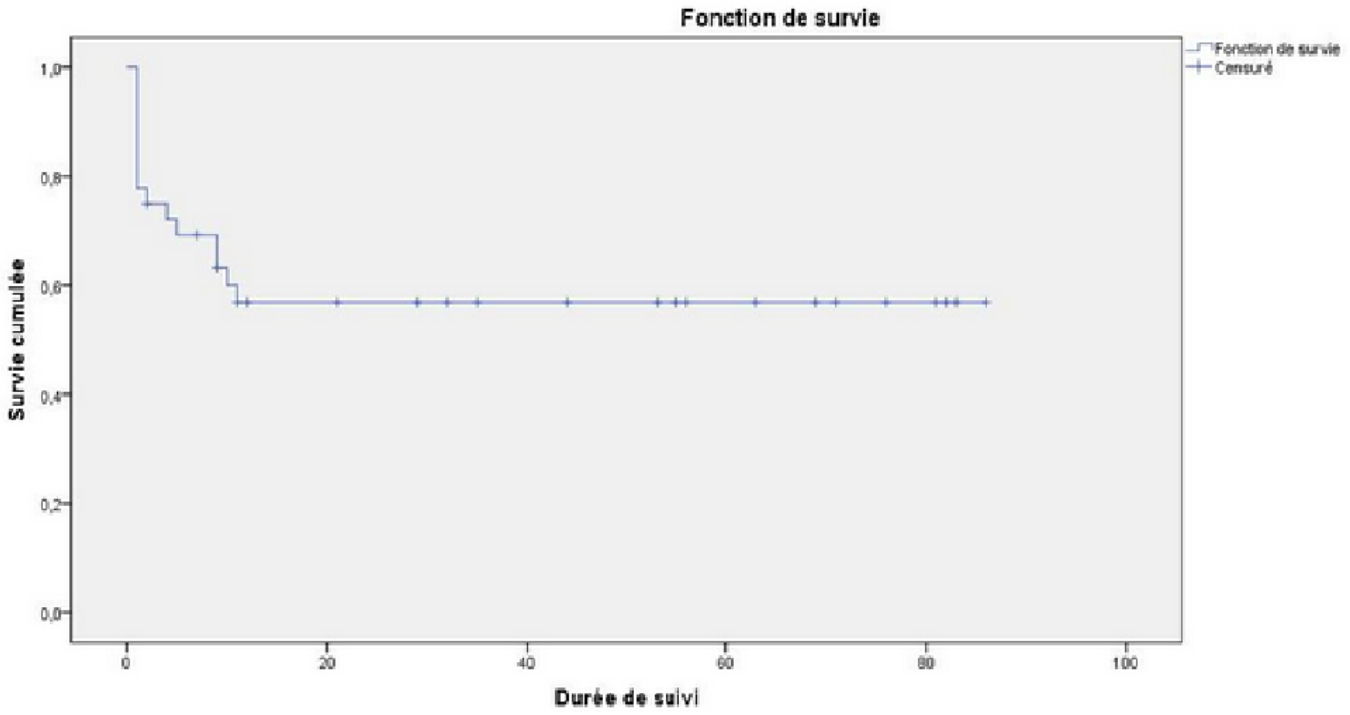
Treatment

- Blood transfusion: if
  - Plq < 30 000/mm^3
  - Hb < 7 g / dl
  - FFP : Fg < 1,5 g /L
- Induction :
  - ATRA :
  - 45 mg/m^2/d until CR
  - 25 mg/ in pts < 18 ans
  - DNR : 60 mg /m^2 d1-2-3
  - Cytarabine : 100mg/m^2 7days, in high and intermediate risk.

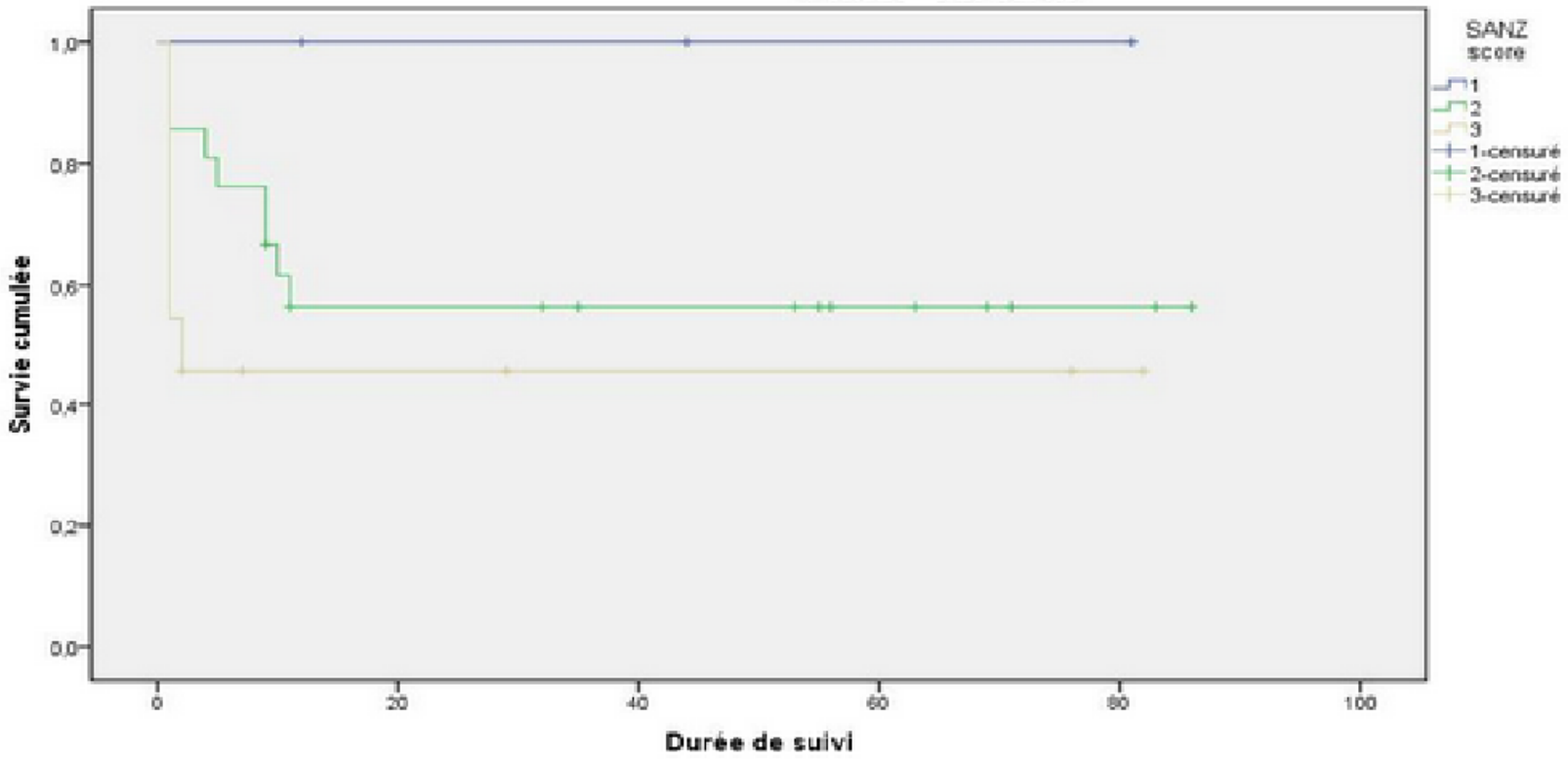
Results and outcome

- CR rate : 50%
- Early death : 10 pts (27%)
  - Bleeding
  - Hyperleucocytosis > leucostasis
  - 5 pts > 70 y
- 2 relapses (8%)

5 y Overal Survival : 58%



5y OS according to Sanz score:
High risk: 43%; Int risk: 57%



Conclusion

- High incidence of APL in our series : 19%
- Median age : 35 ans < occidental series.
- High risk : (30,5 %) and intermediate risk(58,3%) represents: 90% of the series.
  - Delay diagnosis
- Early deaths: 27% must be reduced.
- CR rate is 50% / 90 % in other studies (clinical trials).
- We deplore:

- Lack of cytogenetic and molecular study.
- No national regimen.
- And the unavalaibility of ATO for the relapsed and refractories patients.

Aknowledgements

- The patients
- My team :
  - Dr M. Aiche
  - Dr F. Soltani
  - Dr M. Merrouche
  - Dr F. Kacha
  - Dr R .Nacib
  - Dr S. Refis
  - And the others