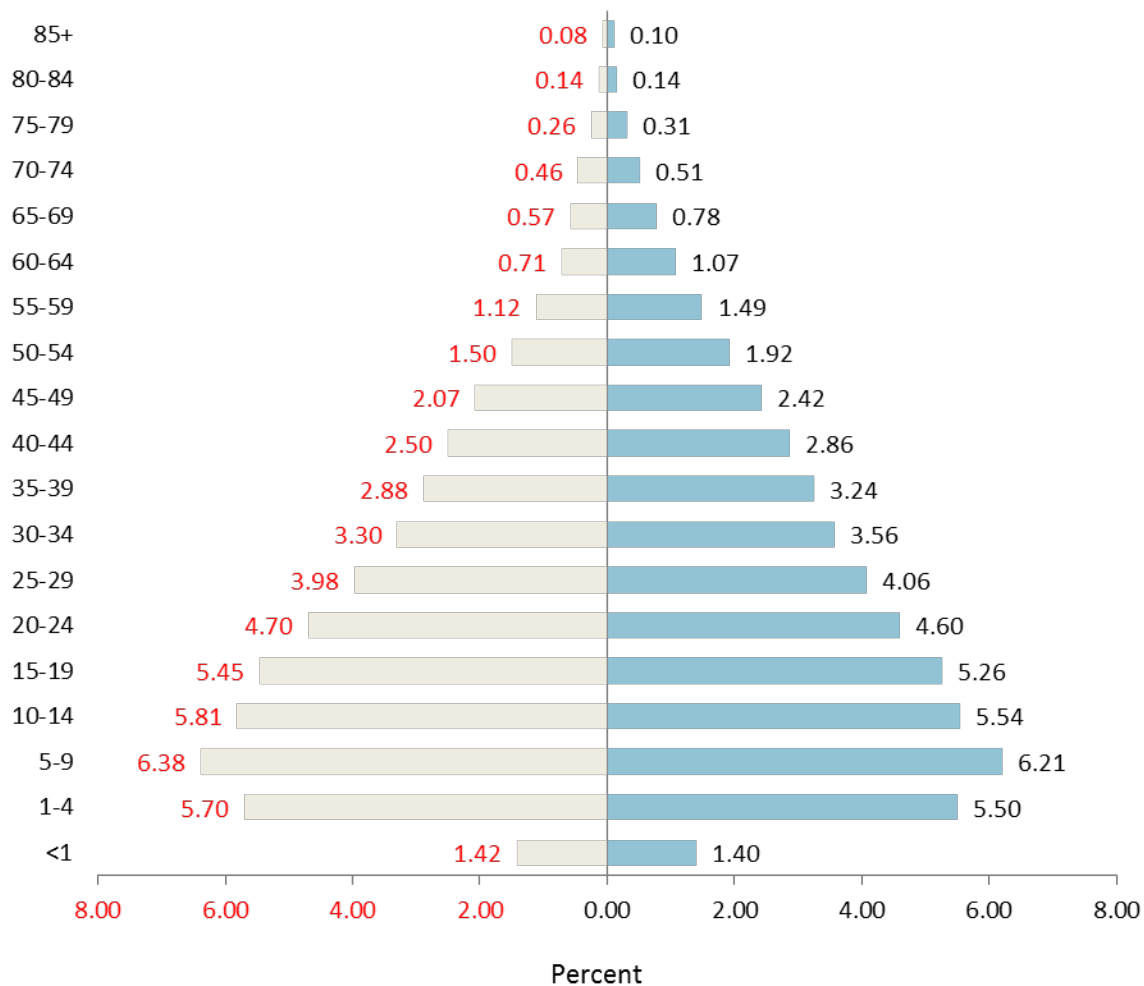


Stem cell transplantation

Sheikha Badryia Center - Kuwait

Dr Salem H Alshemmari
Chairman, Department of
Hematology

Population Pyramid (Kuwaiti) 2011



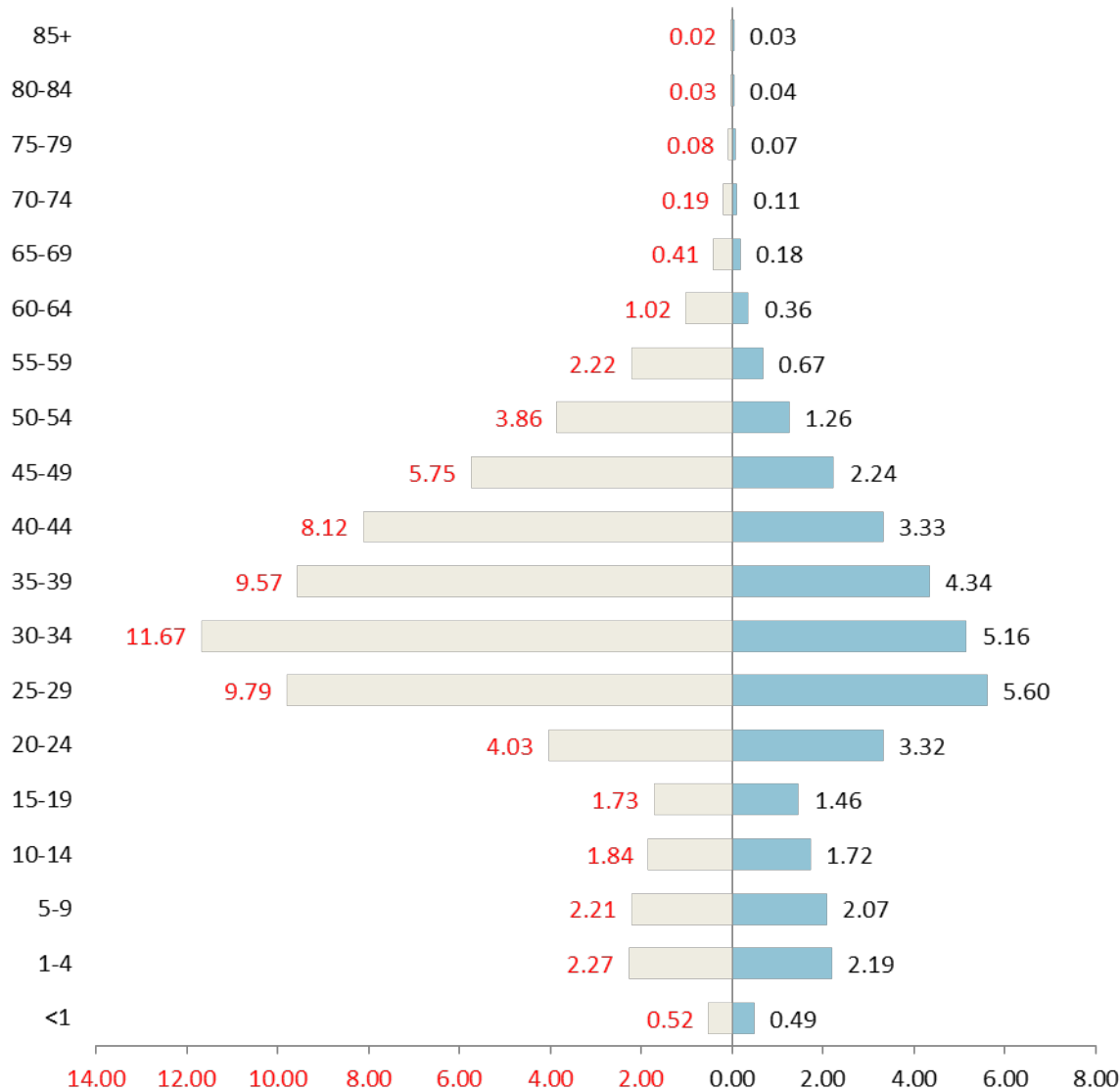
The mid-year population of Kuwait in 2011 reached 3,632,009 individuals.

Males counted for 60.1% and females 39.9% with male to female ratio 1.5:1.

Kuwaiti population totaled 1,164,448 (32.1%). Males represented 571,079 (15.7%) while females represented 593,369 (16.3%).

Male to female ratio was 1:1

Population Pyramid (Non-Kuwaiti) 2011



Non Kuwaitis represented 2,467,561 (67.9%) individuals

Males were 1,612,590 (44.5%) while females totaled 854,971 (23.5%).

Male to female ratio was 2: 1.

Cancer Registry data

The 10 most commonly diagnosed cancers, Kuwait, 2011 (Kuwaiti)

ASR = Age Standardized Incidence Rate / 100,000

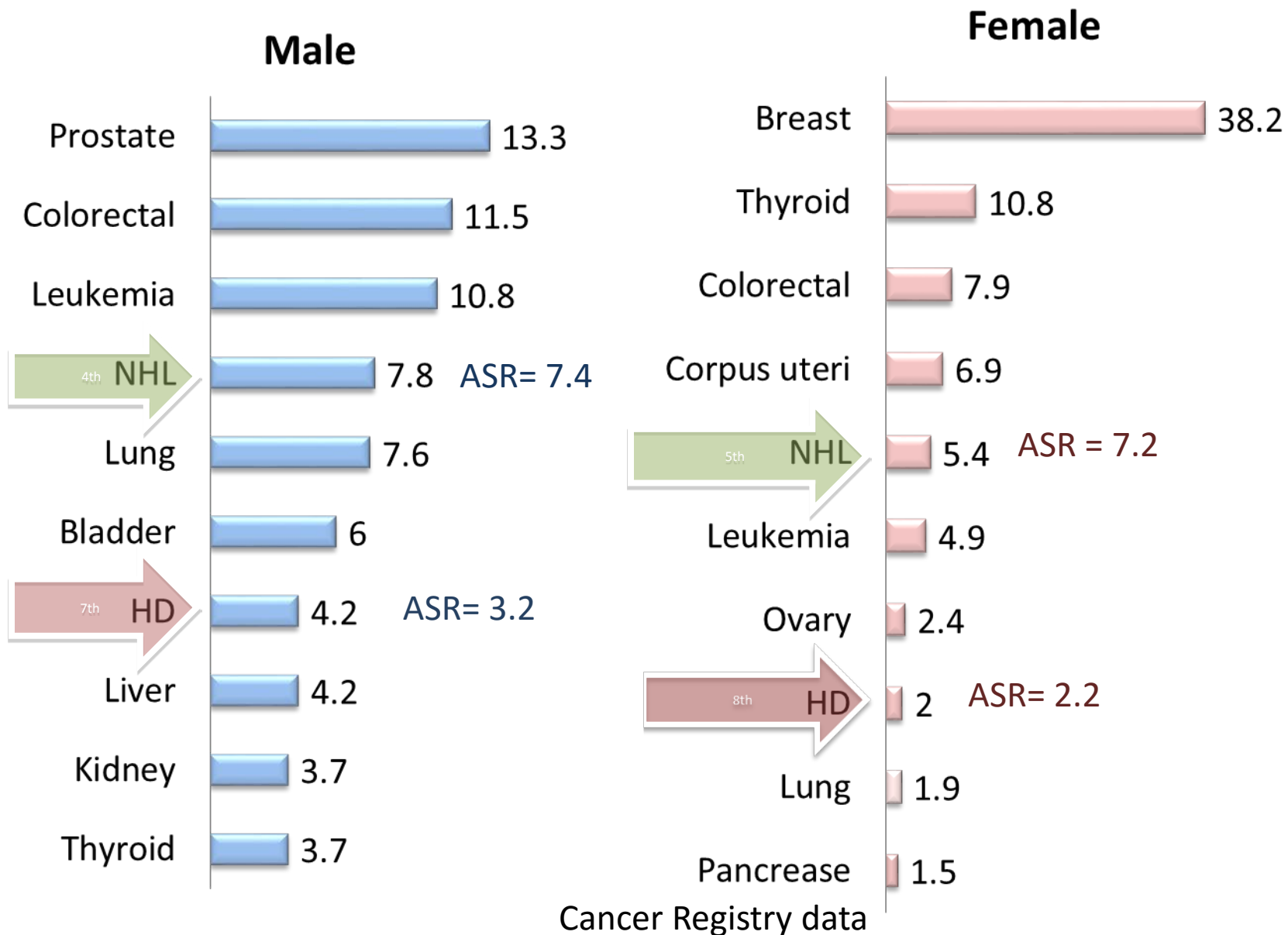
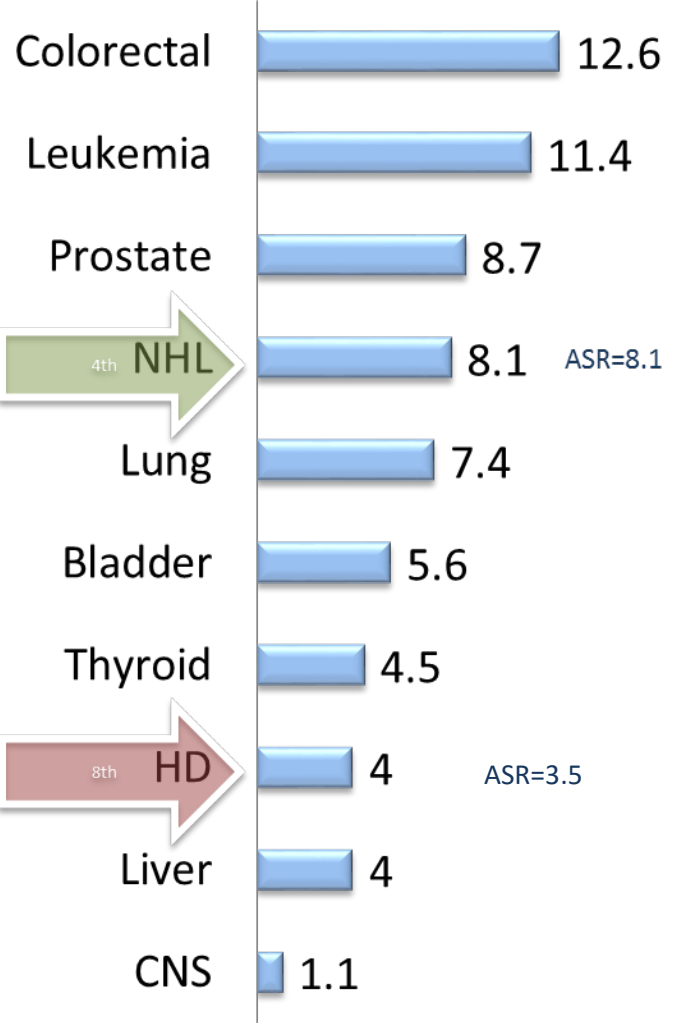


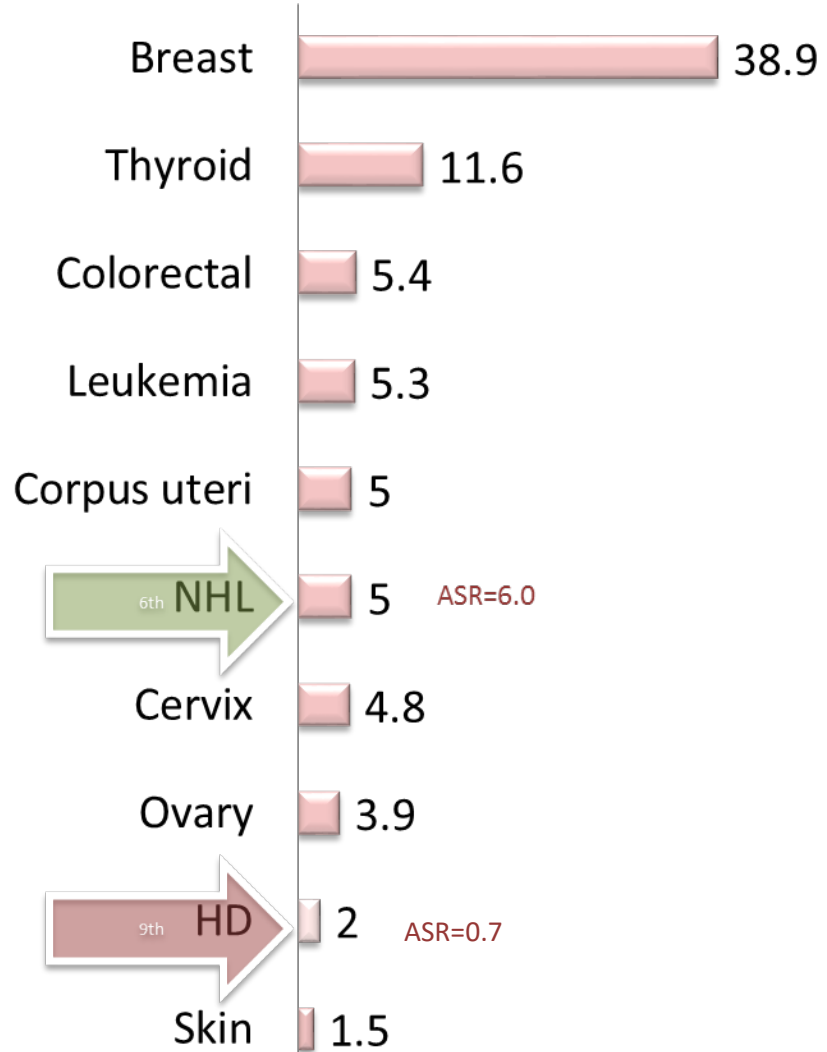
Table 5: The 10 most commonly diagnosed cancers, Kuwait, 2011 (Non-Kuwaiti)

ASR = Age Standardized Incidence Rate / 100,000

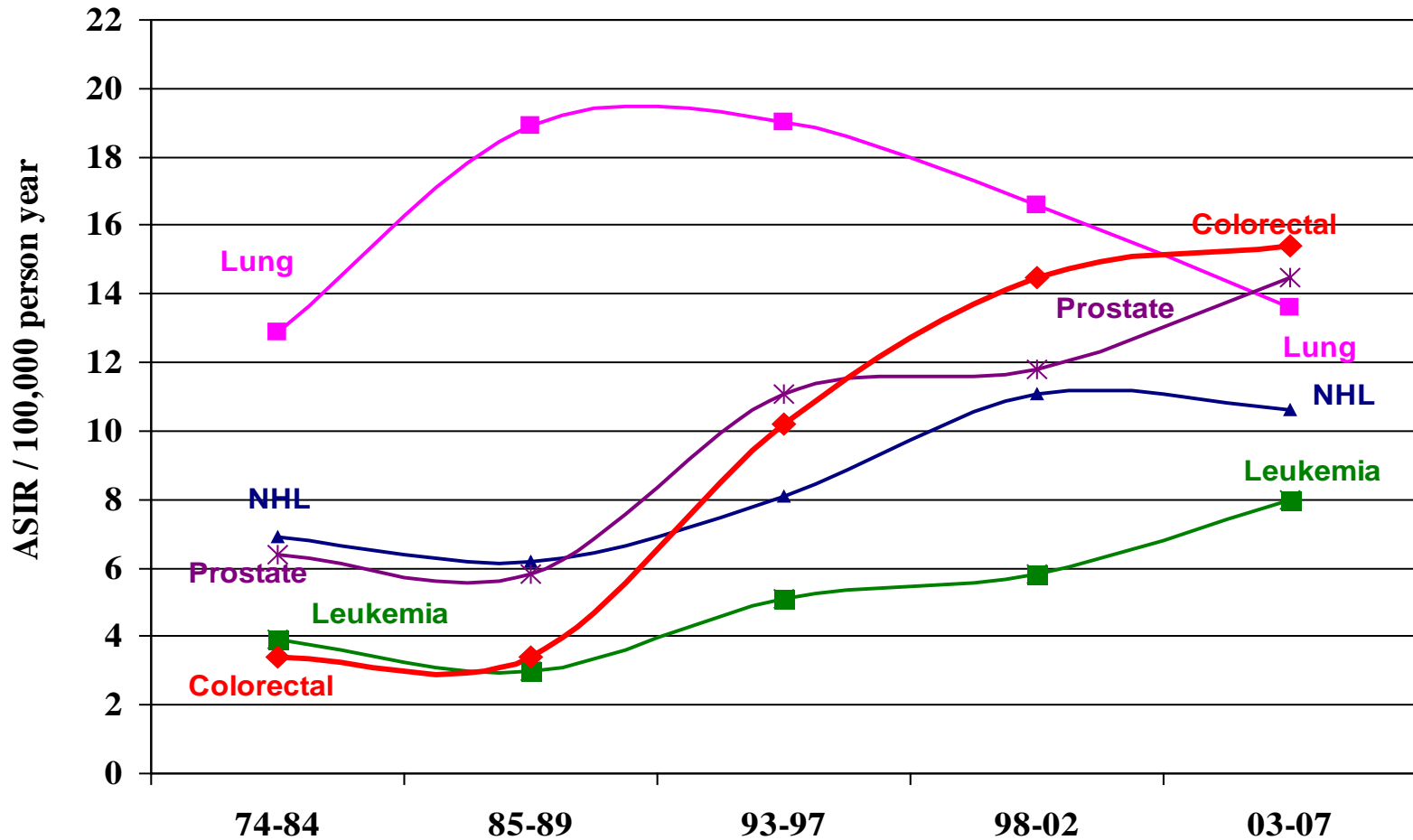
Male



Female

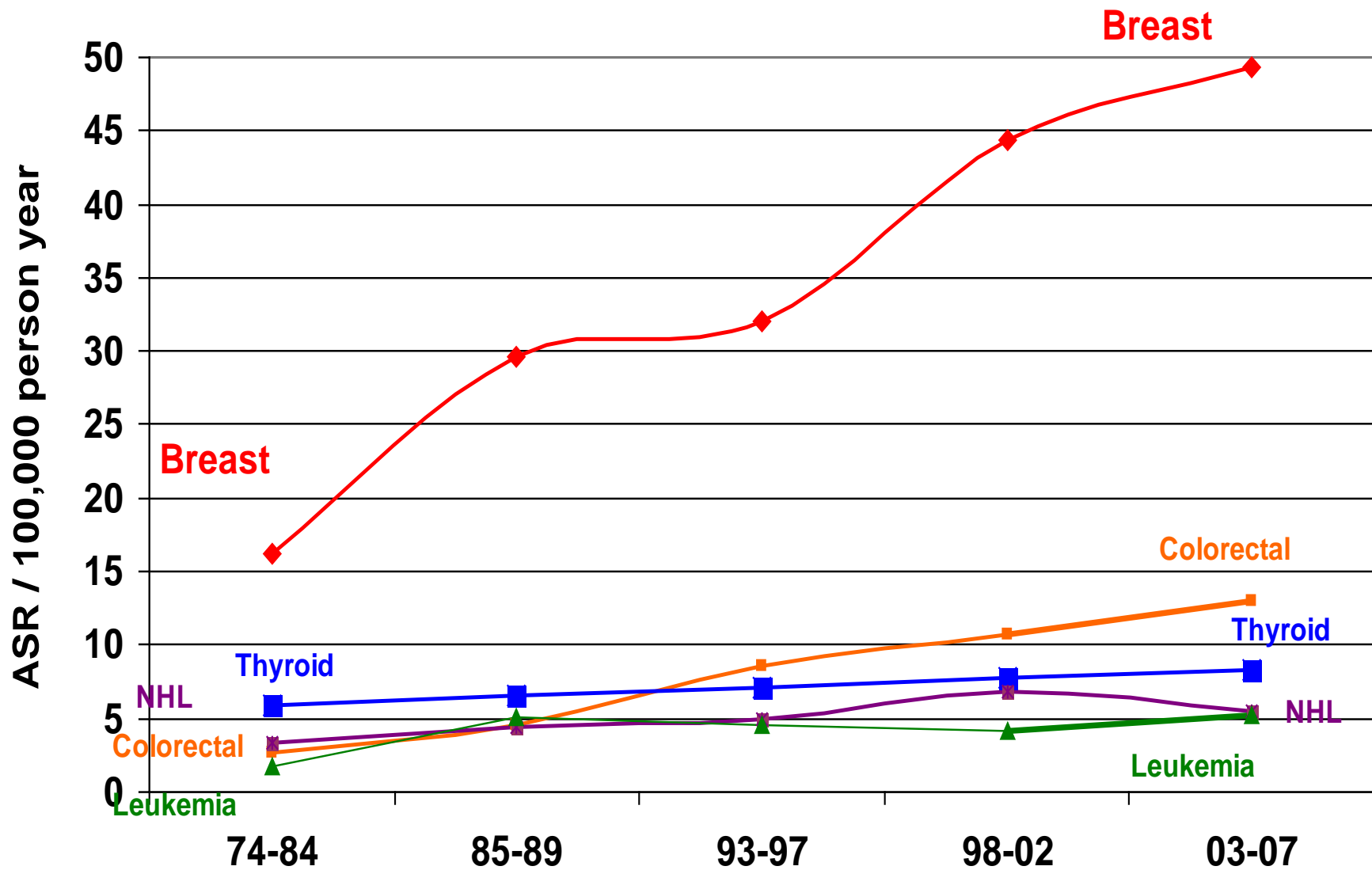


Cancer Registry data



Time Trend of Age Standardized Incidence Rates For the Five Most Common Cancer Sites - Kuwaiti Males, 1974-2007

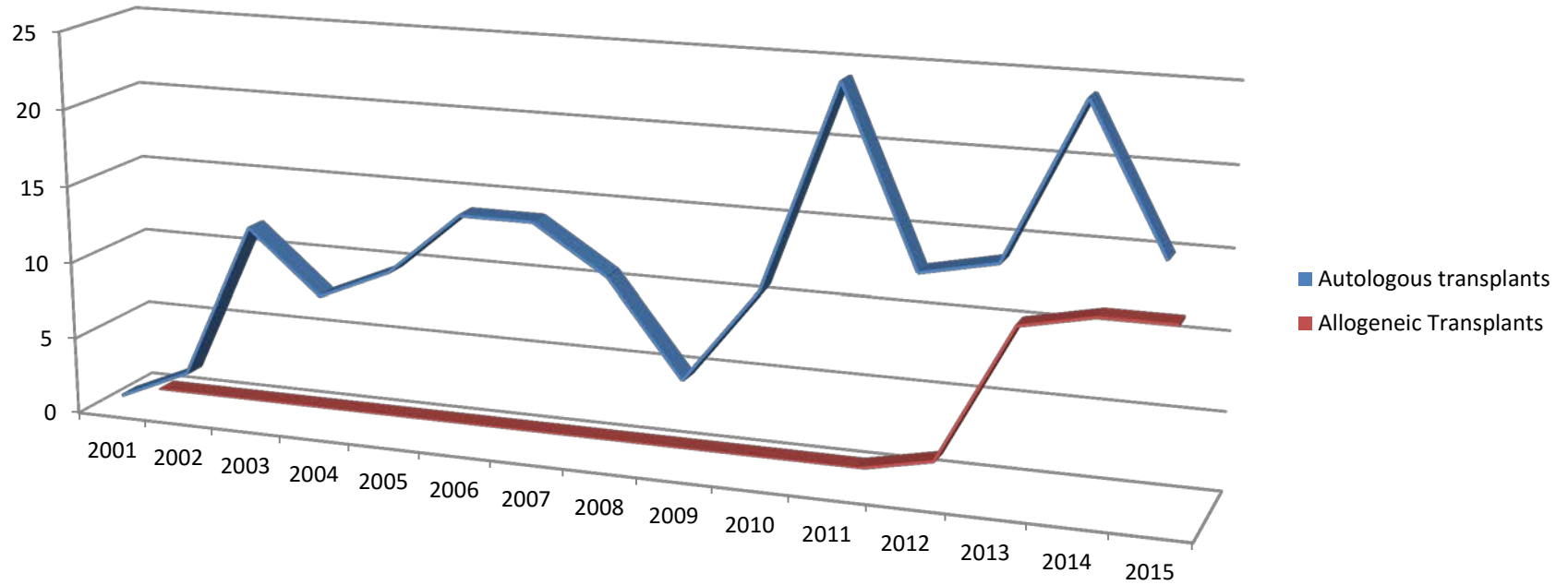
Cancer Registry data



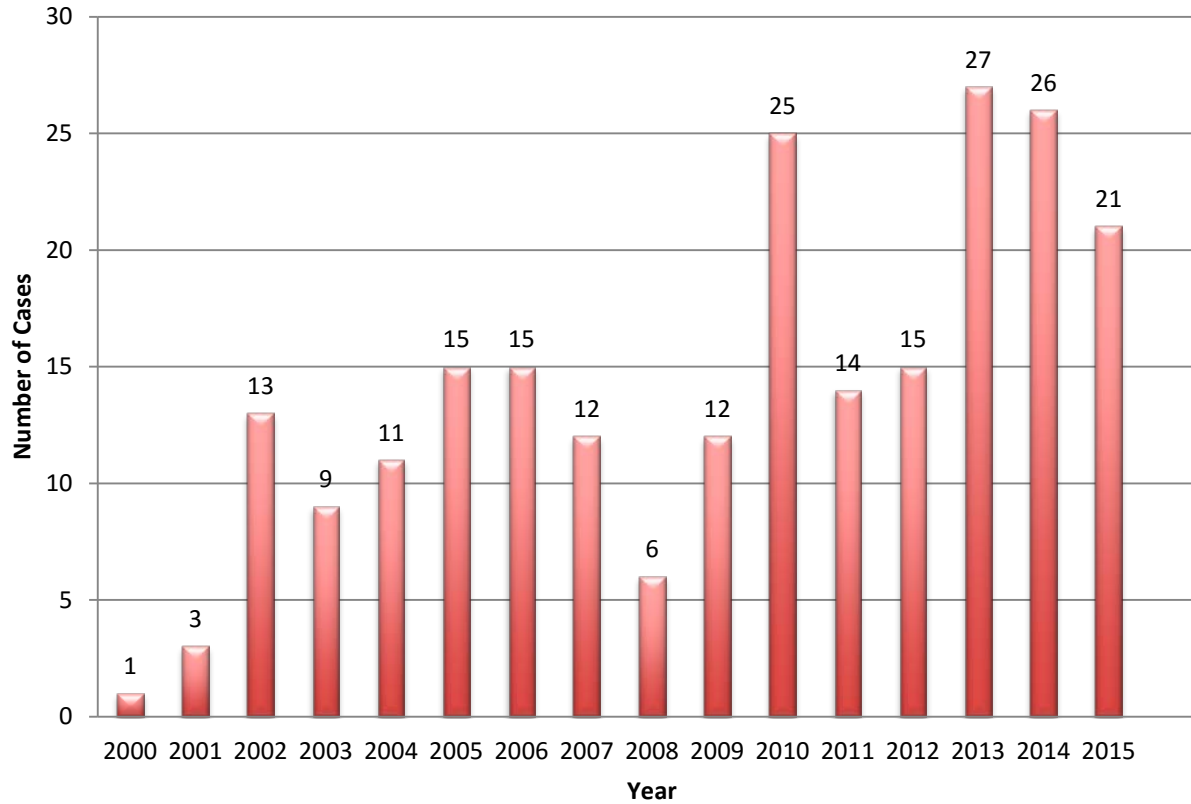
Time Trend of Age Standardized Incidence Rates for the Five Most Common Cancer Sites - Kuwaiti Females, 1974-2007

Cancer Registry data

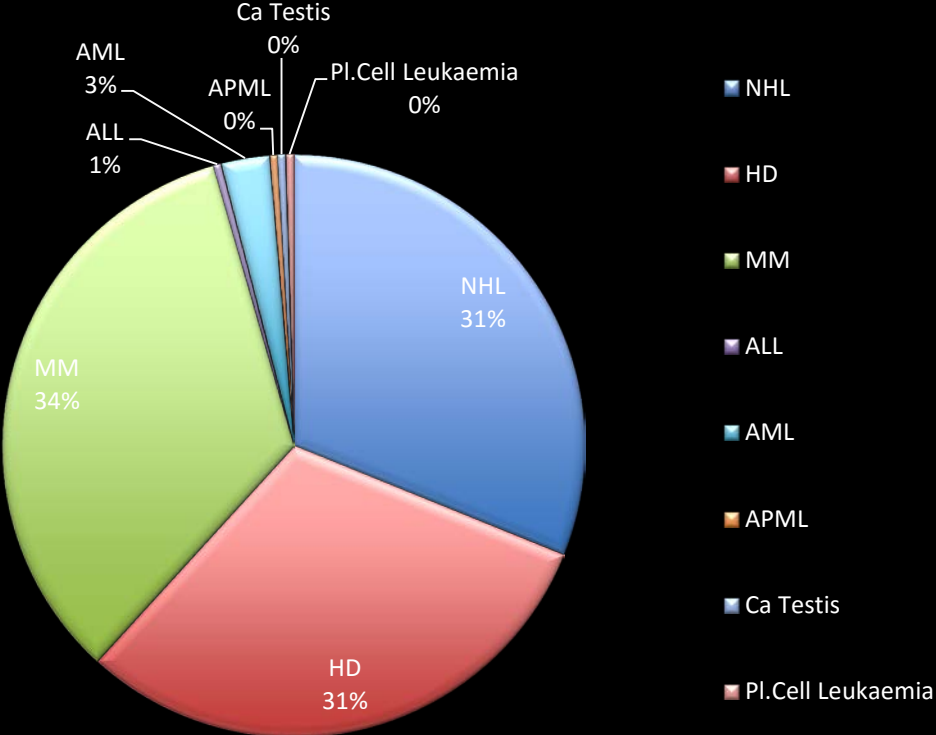
Transplant activity at SBH



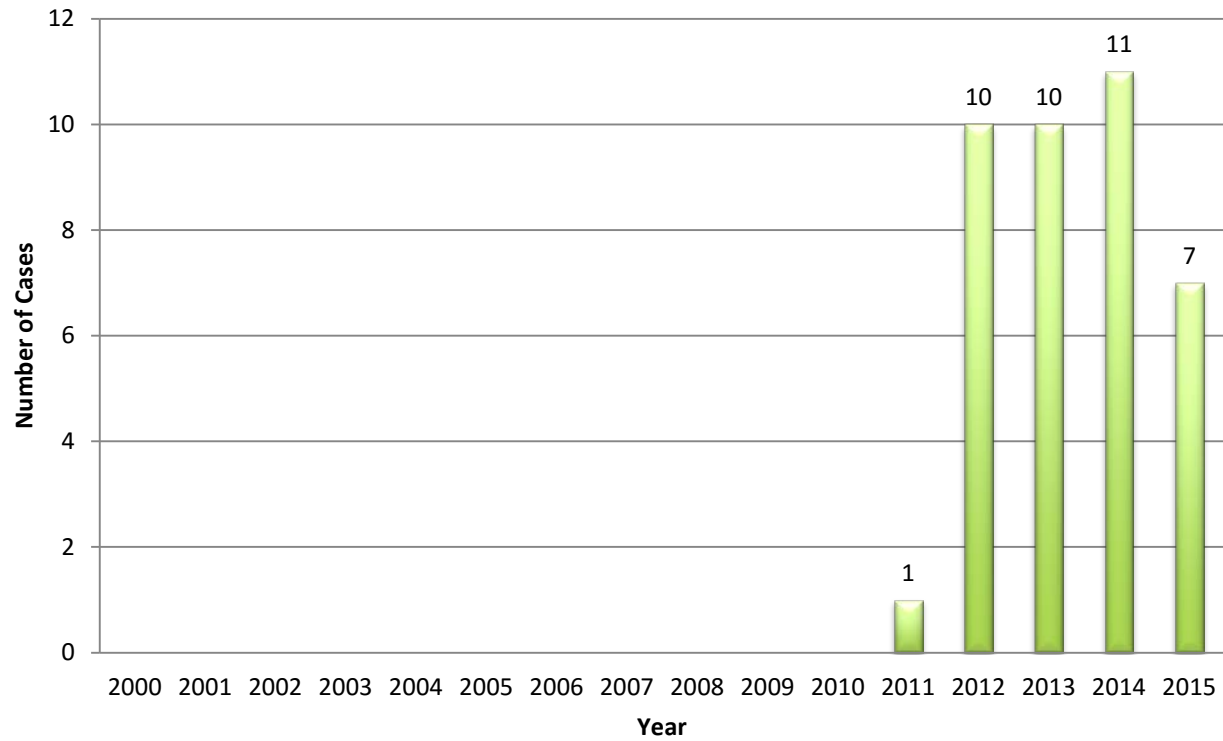
Autologous Haematopoietic Stem Cell Transplants Per Year 2000-2015



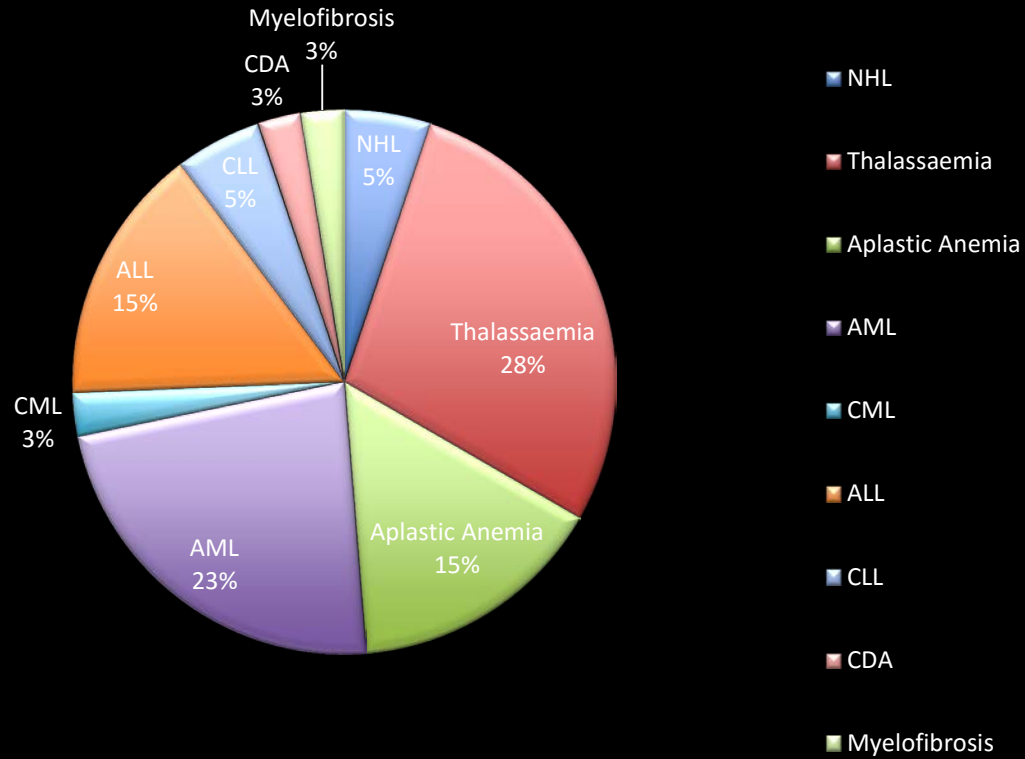
Autologous Transplants By Disease Type 2000-2015



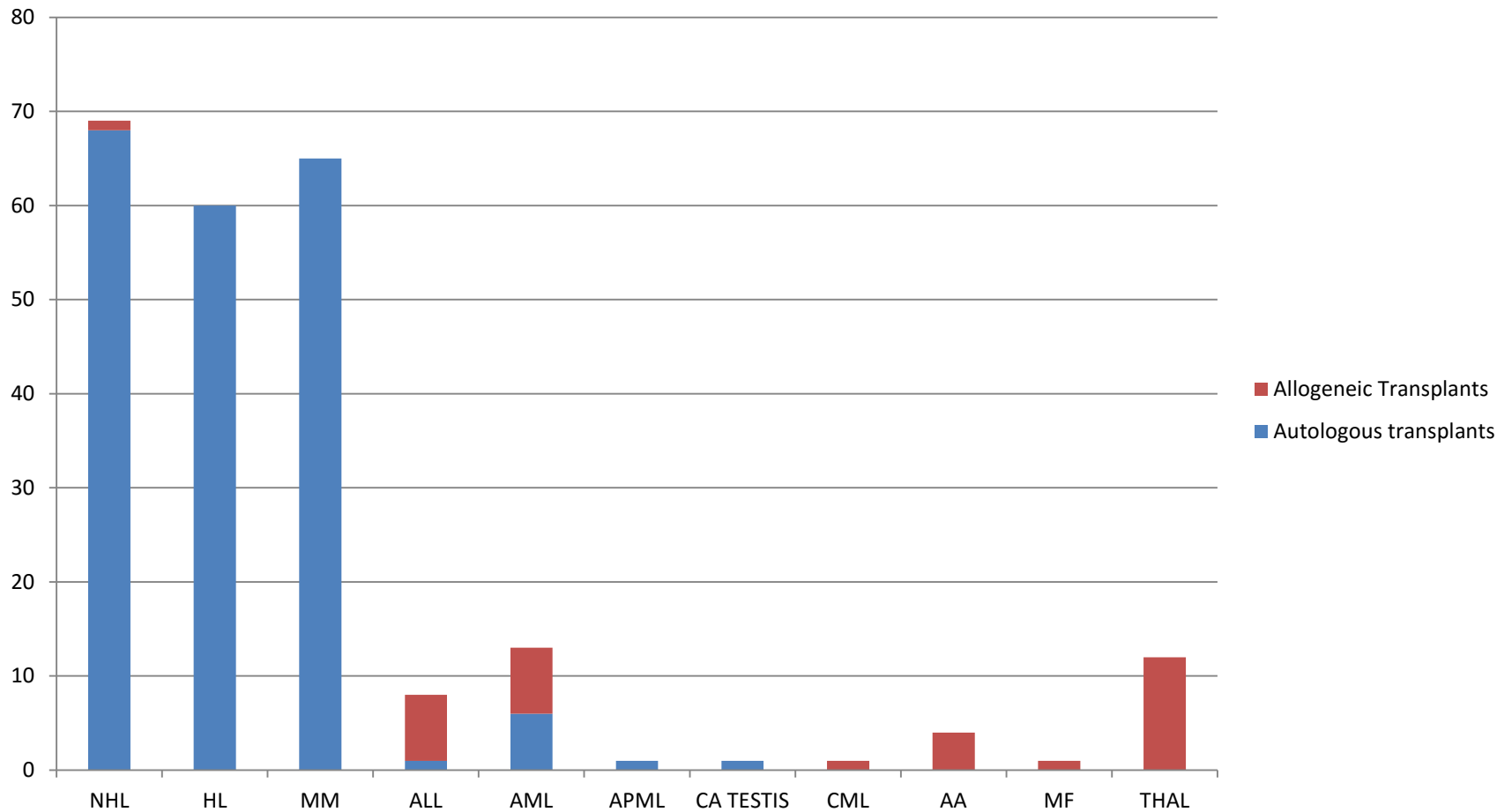
Allogeneic Bone Marrow Transplants Per Year 2000-2015



Allogenic BM Transplants By Disease Type 2011-2015



Indications for Hematopoietic stem cell transplants in SBH



Characteristics of patients undergoing autologous stem cell transplantation

- No. 202
- Median age (range) years 42 (12-61)
- Sex
- Male 81 (67.5%)
- Female 39 (32.5%)
- Nationality
- Kuwaiti 22 (18.3%)
- Non-Kuwaiti 98 (81.7%)

- **Non-Hodgkin's lymphoma 68 (33.7%)**
- Low-grade non-Hodgkin's lymphoma 39 (57.4%)
- Diffuse large B-cell lymphoma 29 (42.6%)

- **Hodgkin's disease 60 (30.7%)**

- **Multiple myeloma 65 (32.2%)**

Stem Cell Mobilization and collection

- The source of Stem Cell in all autologous transplant cases was peripheral blood.
- The source of Stem cell is bone marrow for patients with benign hematological disorders, and peripheral blood in patients with hematological malignancy.

Conditioning Regimens in autologous transplants

- BEAM
- BEAC
- CEAM
- Zevalin – BEAM (one patient)
- Recently LACE
- Melphalan

Conditioning regimens in allogeneic transplants

- Hematologic malignancies : Bu/Cy
- Aplastic anemia : Flu/Cy/ATG
- Thalassemia : Bu/Cy ± thiotepa

Stem Cell dose

- Stem cell viability after thawing ranged average 72%
- The cells infused were:
 - TNC $10.47 \pm 7.31 \times 10^8$ /kg
 - MNC $4.87 \pm 6.30 \times 10^8$ /kg
 - CD34+ $3.92 \pm 3.64 \times 10^6$ /kg
 - CFU $1328.77 \pm 1094 \times 10^4$ /kg

Engraftment

- The mean time for engraftment was 12 days (range 9-14) in Non-Hodgkin's Lymphomas, 11 days (range 9-15 days) in Hodgkin' Lymphomas, 12 days (range 9-14 days) in Multiple Myeloma
- The mean time for platelet transfusion independence was 11 days.
- Transfusion support: a mean of 2 units packed red blood cells and 4 units of platelets concentrates

Allogeneic stem cell transplantation

- 48 consecutive patients with malignant and non-malignant hematological disorders.
- Unmanipulated bone marrow / peripheral blood stem cells from an HLA-identical sibling donor, **one patient was haploidentical brother.**
- The age limit for β -thalassemia major was 20 years, for aplastic anemia was 40 years, and for myelodysplastic syndrome (MDS), acute leukemias, chronic myeloid leukemia (CML), and lymphomas, was 55 years.
- Patients with β -thalassemia major are categorized into risk classes I, II, and III on the basis of Pesaro group risk classification.

Patient, disease, donor, and transplantation characteristics

Characteristic	Median (range)	
	N	%
Age, y	34	(3 – 52)
Male	20	60.6
Positive CMV IgG	32	96.9
Underlying diagnosis		
Non-malignancies§	16	78.8
Acute leukemia†	14	42.4
Chronic myeloid leukemia*	1	3
Other malignancies‡	2	6

TRANSPLANTATION

Transplantation		
GVHD prophylaxis		
Cyclosporin + methotrexate + MMP	10	47.6
Cyclosporin + methotrexate	22	47.6
Cyclosporin + methotrexate + MP	1	4.67
Conditioning		
Bu + Cy	10	47.6
Bu + Cy + Thiotepa	8	38.1
Bu + Cy + ATG	2	9.5
Cy + Fludarabin + ATG	1	4.67
Cell dose		
NC, 10^8 /kg	3.52	(0.651 – 7.56)
CD34, 10^6 /kg	4.45	(1.47 – 11.9)
Neutrophil engraftment	D+13	(D+13 – D+27)
Platelet engraftment	D+18	(D+12 – D+45)
Acute GVHD		
Grade I – II	13	39.4
Grade III – IV	4	12.1
Chronic GVHD	9	27.3

Research Interest

- Outcome studies
- Immune reconstitution
- Collaboration with NMDP
- Infectious complications

Conclusions

- The autologous bone marrow transplant program is well established.
- The allogeneic bone marrow transplant program is in the evolutionary stages.
- Haplo BMT looks very promising and preclude the need CB Banks

