P 2 7. TREATMENT WITH HYPOMETHYLATING AGENTS IN CASES WITH ACUTE MYELOID LEUKEMIA SECONDARY TO MYELODYSPLASIA – THE COLŢEA HEMATOLOGY CLINIC EXPERIENCE.

Andrei Coliță, Elena Coleş, Mădălina Oprea, Ana Maria Ivănescu, Cecilia Ghimici, Geanina Ofițeru, Andrei Turbatu, Anca Roxana Lupu Colțea Clinical Hopital, Bucharest

Hypomethylating agents have an important role in the therapy of patients with high-risk or transformed myelodisplastic syndrome (MDS). These agents (azacitidine and decitabine) are used in the treatment of elderly and frail patients, and lead to hematological improvement and transfusion independency in about 50% of cases and prolongation of survival in patients receiving azacitidine.

In the Colţea Hematology Clinic we used azacitidine in 4 patients, older than 60 years, with acute myeloid leukemia (AML) secondary to MDS. In 3 cases, azacitidine was used as first line therapy resulting in 1 complete remission and 1 partial response. The number of treatment cycles ranged from 1 to 6.

In the 4th case we used azacitidine as postremission therapy with maintenance of remission for 6 month. The most frequent toxicity consisted in moderate/severe thrombocytopenia.

We also used decitabine in a patient with relapsed secondary AML but without achieving remission.

In our opinion, hypomethylating agents are a valuable therapeutic option agents in patients with AML secondary to MDS or high-risk MDS on condition of formulating precise indications and use in selected cases.