P6. EVOLUTION OF CLL PATIENTS IN ADVANCED STAGES OF DISEASE IN MONOCLONALANTIBODIES ERA

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Introduction. The chronic lymphocytic leukemia (CLL) represents the most frequent lymphoproliferation of the grown up patients. It is characterized by the accumulation of malign lymphocytes at the level of bone marrow, blood and lymph nodes with the occurrence of adenopathy and hepatosplenomegaly and the incidence peak is around the age of 72.. From clinical point of view, its evolution implies two stages: a non-aggressive stage which does not require any treatment and an aggressive stage with modest response to conventional therapies. The addition of monoclonal antibodies to the classic treatment schemes at advanced disease stages led to the prognosis amelioration.

Goal. The study goal consists of the evaluation of the prognosis of patients in advanced stages of disease (stage C) as well as the efficiency of the modern treatment schemes.

Material and methods. I conducted a retrospective study on 40 patients with diagnosed with stage C of CLL who were undergoing chemotherapy in association with monclonal antibodies (Rituximab) at the Clinics of Haematology Timisoara between January 2009-December 2013. The treatment efficiency was evaluated based on the following criteria: remission of general clinic symptomatology, diminish of organomegaly, decrease of lymphocytosis, evaluation of the minimal residual disease and the prognosis was estimated based on the blood cell counts, bone marrow aspirate, immunophenotype and cytogenetic investigation.

Results. 85% of the patients with ages ranging between 60-80 years old. At the end of the treatment, 37.5% of the patients showed complete remission, 20% partial remission 22.5% showed disease progress and 20% deaths were recorded. The adverse reactions developed after the administration of Rituximab at 2 patients (5%) required the treatment interruption. 67.5% of the patients did not show any adverse reactions. Organomegaly disappeared at 62.5% of the patients and the adenopathy at 72.5% of the patients at the end of the treatment.

Conclusion. The association of monoclonal antibodies to the different chemotherapy schemes applied to patients diagnosed with stage C of CLL is well tolerated even at older ages , their evolution being positive.