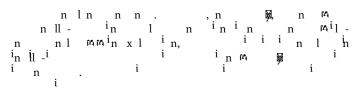
Mature T cell and Natural Killer Cell Tumor Allogeneic Hematopoietic Stem Cell Transplantation in the Kyoto Stem Cell Transplantation Group: Effect of Donor Source

Lewandowska D*

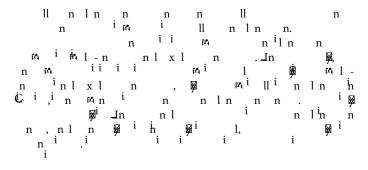
Abstract

Although allogeneic hematopoietic stem cell transplantation (allo- HSCT) is the crucial strategy to cure cases with mature T and natural killer (NK) cell tubercles leukemia, especially those with regressed/ refractory conditions, there's no agreement strategy for patron selection. We retrospectively anatomized the issues of allo- HSCT in 111 cases in 15 Japanese institutions as amulti-institutional common exploration design. Thirty- nine cases entered bone gist or supplemental blood stem cell transplantation from a f liated benefactors (rBMT/ rPBSCT), 37 entered BMT/ PBSCT from unconnected benefactors (uBMT/ uPBSCT), and 35 entered cord blood transplantation (CBT). Overall survival (zilches) and progression-free survival (PFS) at 4 times were 42 and 34, independently. The accretive frequentness of relapse and nonrelapse mortality was 43 and 25. In multivariate analysis, CBT showed similar zilches with rBMT/ rPBSCT(rBMT/ rPBSCT versus CBT hazard rate(HR),1.63; P = .264) and better zilches compared with uBMT/ uPBSCT(HR,2.99; P = .010), with a trend toward a lower relapse rate(rBMT/ rPBSCT versus CBT HR,2.60; P = .010; uBMT/ uPBSCT versus CBT HR,2.05; P = .082). This superiority of CBT was more defnite in on- complaint



Material and Methods

Data Collection



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Cases

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Statistical Analysis

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