Introduction

The prognosis of patients with acute myeloid leukemia (AML) is dependent on the risk group. Risk factors for poor outcome include age > 60 years, secondary leukemia, high-risk karyotype, relapse after prior HSCT, response and survival following salvage therapy. Despite improvements in supportive care, the 3-year disease-free survival (DFS) of 124 patients who achieved CR has been reported to be 32% (with a median follow-up of 8.9 years).

Patients and Methods

Patients

Between 1999 and 2009, 234 pts from 3 centers in Germany entered the study. Diagnosis and classification of AML were performed according to FAB classification. CR was defined as a cell count of 5 x 10^9/l with < 5% blasts in the blood smear and a blast count of < 5% in the bone marrow aspirate. CR without incomplete blood chimerism (CR-CI) was defined as a cell count of 5 x 10^9/l with < 5% blasts in the blood smear and a blast count of < 5% in the bone marrow aspirate with a complete blood chimerism. CR was confirmed by cytogenetics.

Response to Mito-FLAG

Six patients are not evaluable for response to Mito-FLAG because they had to be excluded from the study before the beginning of therapy. Six patients are not evaluable for response to Mito-FLAG because they had to be excluded from the study before the beginning of therapy. The difference in CR rate between Mito-FLAG (B) and Mito-FLAG (CI) was statistically significant (p=0.04) (table 3a). In addition, the prob of 12-month DFS for responders was higher in Mito-FLAG (B) than in Mito-FLAG (CI) (figures 1-3).

Definitons of response

Partial remission (PR) was defined as a reduction in the number of blasts in the blood smear to <= 20% with a count of < 5 x 10^9/l and by > 50% reduction in blasts in the bone marrow. Complete remission (CR) was defined by a cell count in the blood smear of < 5 x 10^9/l and < 5% blasts. CR-CI was defined by a cell count in the blood smear of < 5 x 10^9/l and no evidence of blasts in the bone marrow. CR was confirmed by cytogenetics.

Final Analysis

An independent data management was conducted by statisticians. The DFS and OS were calculated from the date of the first course of Mito-FLAG as the endpoint of interest. The Kaplan Meier product limit method was used to calculate the DFS and OS. The patients were censored at the time they stopped the treatment. All-cause probabilities of survival were calculated using the method of Kaplan-Meier.

Results

Table 1 shows the characteristics of the patients. The median age was 57 years, and the median age of the patients was 57 years. The median age was 57 years, and the median age of the patients was 57 years. The median age of the patients was 57 years.

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Appendix