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Impact of Imatinib interruption and duration of prior hydroxyurea on the treatment outcome in CML patients

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Introduction: The introduction of Imatinib in 1998 has revolutionized the management of chronic myeloid leukemia. Optimal response requires that patients should be maintained on the drug continuously. We retrospectively reviewed patients referred to Kasr Al-Ainy Center of Clinical Oncology and Nuclear Medicine (NEMROCK) with the diagnosis of chronic phase CML and treated with Imatinib aiming at evaluation of the influence of Imatinib interruption and prior hydroxyurea use on the response and progression free survival.

Patients & Methods: Sixty patients were included in this study. The median age of the patients was 46 years with no gender predominance. Thirty three patients (55%) received Imatinib upfront while 27 (45%) received Imatinib post hydroxyurea. At a median follow up of 22 months, 55 patients (91.6%) achieved complete hematologic response, the percentage was insignificantly higher among the group who had Imatinib upfront ($p=0.234$), while major molecular response and complete molecular response were reported in 57.5%, 27% of patients who received Imatinib as first line vs. 55.5% and 22% of cases who received Imatinib post hydroxyurea respectively. The median treatment duration was 14.5 months with median treatment interruption of 21 days. The 5 years progression free survival (PFS) was 33%. Among the group of patients who received Imatinib regularly, PFS was longer ($p=0.049$) but there was no difference between those who received prior hydroxyurea versus those who did not ($p=0.67$).

Conclusion: In conclusion, our results are inferior to that of reported literature in terms of PFS and we need more governmental support to supply the drug without interruption to improve the outcome of therapy.

Biography

Raafat R Abdel Malek is currently working as Consultant of Clinical Oncology at Cairo Oncology Centre, Egypt. He is also working as a Lecturer of Clinical Oncology at Department of Clinical Oncology, Faculty of Medicine; Cairo University, Egypt. He has pursued his Master's degree (MSc) in Radiation Oncology from Faculty of Medicine, Cairo University, Egypt and Fellowship in Clinical Oncology (FRCR) from The Royal College of Radiologists, United Kingdom. He has more than 20 publications in many reputed international journals.

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