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Allogeneic stem cell transplantation is effective after pathway inhibitor treatments in CLL – a retrospective study on behalf of the Chronic Malignancies Working Party of EBMT

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OBJECTIVES

- Describe outcome after allogeneic stem cell transplantation in double-exposed CLL patients.

CONCLUSIONS

- Outcome after alloSCT is as good as in pre-cBTKi / BCL2i era (M. van Gelder, BMT 2017)
- Refractory CLL before alloSCT: inferior outcome
- Outcome not inferior with del(17p) / *TP53* mutation
- AlloSCT can be considered in transplant-eligible patients
  - especially when ncBTKi and/or liso-cel are not available

INTRODUCTION

The prognosis for most CLL patients refractory to both covalent BTK- and BCL2-inhibitors (cBTKi and BCL2i) remains dismal, even with non-covalent BTKi and liso-cel.

AIM

Evaluate outcome of allogeneic stem cell transplantation (alloSCT) in double-exposed CLL patients.

METHODS

EBMT Registry

- CLL patients
- alloSCT between 2015 and 2020
- exposed to both cBTKi and BCL2i
- no Richter's transformation
- Kaplan-Meier for Graft-versus-Host Relapse-Free Survival (GRFS), PFS, Overall Survival (OS)
- Competing Risks Analyses for cumulative incidence of Relapse and non-Relapse Mortality (NRM)

RESULTS

- 127 patients
- median age 60 years (range 31 – 71)
- prior chemo-immunotherapy in 84%
- 46% with known *TP53* abnormalities
- 80% BCL2i as last treatment before alloSCT
- median duration of last treatment before alloSCT 4.4 months (range 0.2 – 22)
- 77% responsive disease at alloSCT
- 81% reduced-intensity conditioning
- 65% 10/10 HLA-matched donor

Figure 1. Outcome (OS) after alloSCT similar as in pre-cBTKi/BCL2i era

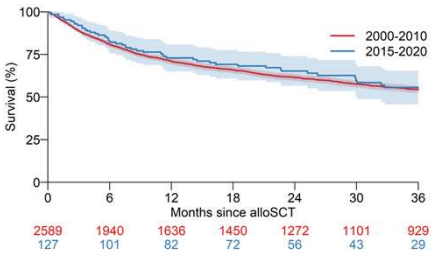


Figure 2. OS, PFS, GFRS, CIR and NRM after alloSCT in patients exposed to cBTKi and/or BCL2i as first treatment

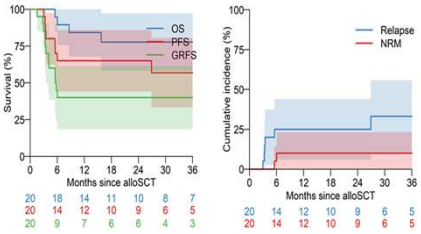


Figure 3. OS, PFS, GFRS, CIR and NRM after alloSCT according to response before alloSCT in patients treated with a cBTKi and / or BCL2i as last treatment before transplantation.

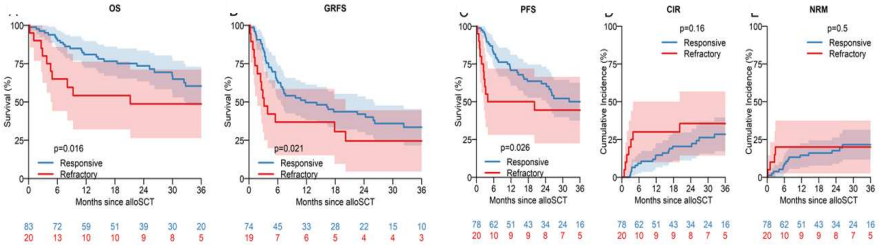
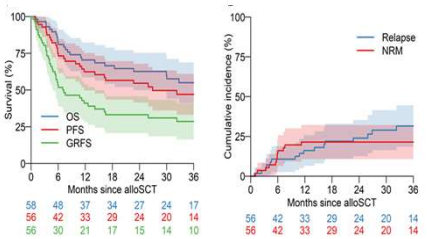


Figure 4. OS, PFS, GFRS, CIR and NRM after alloSCT in double-exposed patients with known *TP53* abnormalities



REFERENCES

M van Gelder et al., Long-term survival of patients with CLL after allogeneic transplantation: a report from the European Society for Blood and Marrow Transplantation, Bone Marrow Transplant 2017; 52(3):372-380.

DISCLOSURES

None

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