

Boletín informativo

Enero-Febrero
2022

Noticias

1 El pago de anualidad 2022 se recibirá del 2 al 31 de enero 2022 ya que las constancias con vigencia 2022 se enviarán a impresión el 1 de febrero 2022. (Es necesario estar al corriente)

La cuota anual de socio es de \$500.00 pesos.

Datos bancarios para realizar el pago:

Nombre de la cuenta: Sociedad mexicana de terapia celular y trasplantes de médula.

Banco: Banorte. Cuenta bancaria: 0475749312. Clabe interbancaria: 072580004757493126.

** Favor de enviar la ficha de depósito con su nombre a hematohu@yahoo.com

Comentarios y novedades

1- Las reuniones académicas en este año 2022, serán llevadas a cabo cada 2 meses , la primera el jueves 24 de febrero , horario: 19:30 hs. Esperamos contar con su participación.

2- Por el impacto del COVID -19 no se ha llevado a cabo nuestro Congreso anual. Se había programado para febrero de este año, pero hemos decidido posponerlo para la primavera o verano del 2022 de acuerdo a las condiciones de la pandemia. Posteriormente les comunicaremos novedades al respecto.

3- Para la elección de nuevo Presidente de la SMTT, únicamente se inscribió el Dr. Guillermo J. Ruiz - Argüelles. Agregamos su plan de trabajo. El cambio se hará en el Congreso de la Sociedad en este 2022.

4- No olvidar los grupos cooperativos de investigación en trasplantes que están activos y requieren de nuestro apoyo.

5- Anexo presentamos algunos artículos que nos han parecido interesantes y tienen acceso libre:

Real-world outcomes of autologous and allogeneic hematopoietic stem cell transplantation for relapsed/refractory Hodgkin lymphoma in the era of novel therapies: a Canadian perspective.

Transplantation and Cellular Therapy, 2021. <https://doi.org/10.1016/j.jtct.2021.12.005>

- Both autologous and allogeneic hematopoietic cell transplants have a curative potential
- Novel therapies such as BV or CPIs are not curative, and the duration of response is limited
- Allogeneic hematopoietic cell transplant should be strongly considered for patients who relapse following autologous transplant
- At the time of HL relapse, early referral to a transplant center is mandatory

First-line high-dose therapy and autologous blood stem cell transplantation in patients with primary central nervous system non-Hodgkin lymphomas—a single-centre experience in 61 patients. Annals of Hematology, 2021.

<https://doi.org/10.1007/s00277-021-04745-z>

• Retrospectively collected long-term follow up data of 61 consecutive patients with PCNS-NHL. Thirty-six patients were treated with conventional chemoimmunotherapy (cCIT) only (CT-group). Seventeen patients received an induction cCIT followed by HDT and ASCT.

- Treatment with HDT+ASCT is feasible and offers the chance for long-term survival with low treatment-related mortality in younger patients

• ORR, PFS and OS were better with HDT than with conventional cCIT alone

• Further studies need to be done to examine the role of HDT in PCNSL

Association between preconditioning absolute lymphocyte count and transplant outcomes in patients undergoing matched unrelated donor allogeneic hematopoietic stem cell transplantation with reduced-intensity conditioning and anti-thymocyte globulin. Therapeutic Advances in Hematology, 2021. <https://doi.org/10.1177/20406207211063783>

• Evaluate the association of low preconditioning ALC with outcomes in patients undergoing matched unrelated donor (MUD) alloSCT with reducedintensity conditioning (RIC) and ATG

• A single-center retrospective longitudinal cohort study of acute leukemia and myelodysplastic syndrome patients over 18 years old undergoing alloSCT. In total, 64 patients were included and dichotomized into lower ALC and higher ALC groups with the cutoff of 500/ μ l on D-7.

• Patients with lower ALC are exposed to excessive dose of ATG, leading to profound T-cell depletion that results in higher infectious mortality and shorter OS. Our results call for the implementation of more creative dosing regimens for patients with low preconditioning ALC

Si deseas participar en el boletín, puedes enviar tus comentarios a hematohu@yahoo.com

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