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GvHD Prophylaxis

## July 2019 | Conditioning regimens for stem cell transplantation in GvHD

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Conditioning regimens for patients undergoing stem cell transplantation (SCT) are essential, as they help to prevent the patient's body from rejecting the transplanted stem cells. Despite there being options available for patients, many of these have only been tested in phase I or II trials, and as such, further investigation is necessary to enable the development of options for older, unfit patients. The GvHD Hub will focus on providing educational content around conditioning regimens for SCT in GvHD this month.

Here are some highlights of content the GvHD Hub has previously covered on conditioning regimens for SCT:

### **PT-Cy in matched and haploidentical transplant regimens receiving myeloablative timed sequential busulfan conditioning regimen**

At ASCO 2019, [Uday Popat, from MD Anderson Cancer Center, Houston, US](#), presented the results of a phase II study ([NCT02861417](#)), evaluating post-transplant cyclophosphamide (PT-Cy) in patients receiving a myeloablative fractionated busulfan conditioning regimen. Results of the trial showed that this conditioning regimen, combined with PT-Cy GvHD prophylaxis, reduced both the incidence of severe acute and chronic GvHD, and relapse rates in the haplo-HCT setting.

### **Conditioning regimens in patients undergoing stem cell transplantation**

Jean El Cheikh, from the American University of Beirut Medical Center, Beirut, LE, spoke to the GvHD Hub about how despite there being a need, there is not an established conditioning regimen. He stated there are three criteria which need to be taken into consideration, the comorbidity and age of the patient, the specifics of the disease, and the type of transplantation.

### **GvHD prophylaxis with RIC regimen combined with anti-thymocyte globulin and PT-Cy**

Reduced-intensity conditioning (RIC) for allogeneic SCT is known to induce GvHD, and thus increase non-relapse mortality (NRM). Maria Salas, from Princess Margaret Cancer Center, Toronto, CA, presented a session at EMBT 2019 on a study that aimed to assess the safety and efficacy of RIC combined with anti-thymocyte globulin (ATG) and PT-Cy.

### **Comparison of three RIC regimens to prevent GvHD with HCT**

This phase II study ([NCT02208037](#)) investigated combination reduced-intensity conditioning regimens as prophylactic treatments for GvHD. When compared to the control group, the tacrolimus, mycophenolate mofetil, and post-transplantation cyclophosphamide arm was the only intervention to show an improved GFRS due to low rates of severe aGvHD and cGvHD requiring immunosuppression. These results have supported the launch of a phase III study (BMT CTN 1703) prospectively comparing high-dose post-transplantation cyclophosphamide with methotrexate and a calcineurin inhibitor.

Watch out for more content surrounding the treatment of elderly, unfit patients with AML on the AML Global Portal, or via our social channels on Facebook, Twitter and LinkedIn.

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