OS-HEM-05  Hematology

Gene Mutation Profile in Chronic Myelogenous Leukemia BCR-ABL Positive Chronic Phase Patients Which Not Response to Imatinib Treatment in Dr.soetomo Teaching Hospital Surabaya Indonesia

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Background: To determine patterns of gene mutations in BCR-ABL tyrosine kinase in chronic myelogenous leukemia BCR-ABL positive chronic phase who do not complete molecular response to imatinib treatment

Methods: Gene Mutation Analysis has been done in sixteen chronic myelogenous leukemia patients with BCR-ABL positive chronic phase who are not complete molecular response to Imatinib after 18 months treatment

Results: We found C494T gene mutation in 9 (56.25%) patients, T1052C gene mutation in 16 patients (100%), and T932C gene mutation in 13 patients (81.25%). One type of mutation found in one patient, two types of mutations in 6 patients, and 3 mutations in 9 patients.

Conclusions: No significant effect of the C494T mutation and the T932C mutation with a single mutation of the tyrosine kinase drug resistance. There is influence of the T1052C single mutation to tyrosine kinase drug resistance.

OS-HEM-06  Hematology

Cardiotoxicity Effect of Doxorubicin in Non Hodgkin Lymphoma Patients Based on the Decrement Left Ventricular Ejection Fraction

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Background: To study the incidence of doxorubicin cardiotoxicity of in NHL patients who received CHOP (cyclophosphamide, doxorubicin, oncovin, prednisone) regimen in Dr. Soetomo Hospital, using echocardiography (EF, ejection fraction).

Methods: Fifteen NHL patients treated with CHOP were studied longitudinally. Echocardiography was done in patients at baseline, and after cumulative dose of doxorubicin = 200 and = 300 mg/m². Cardiotoxicity was defined as a decrease of LVEF = 10% from baseline or absolute LVEF < 50%.

Results: There was a decrease of mean LVEF after cumulative dose of doxorubicin = 200 mg/m² (2.87% from baseline, p>0.05) but without cardiotoxicity effect. There was a significant decrease of mean LVEF of 6.36% from baseline (p<0.05) after cumulative dose of doxorubicin = 300 mg/m² with cardiotoxicity effect observed in 2 patients (13.3%). The decrement of LVEF of these 2 patients were 10.45% and 26.09%.

Conclusions: Cardiotoxicity effects were observed significantly in NHL patients receiving CHOP regimen, after cumulative doses of doxorubicin = 300 mg/m² (or after the 6th cycle).

OS-HEM-07  Hematology

Prognostic Impact of Beta-2 Microglobulin in Patients with Non-Gastric Marginal Zone Lymphoma

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Asian Medical Center, University of Ulsan College of Medicine, Korea; 2 Asian Medical Center, University of Ulsan College of Medicine, Korea; 3 Asian Medical Center, University of Ulsan College of Medicine, Korea; 4 Background: Although serum Beta-2 microglobulin (B2M) has been suggested as a prognostic factor for several hematologic malignancies, this was rarely investigated in marginal zone lymphoma (NZL).

Materials: Between January, 2000, and May, 2013, a total of 270 patients with non-gastric (NG)-MZL were identified from database of Asan Medical Center, Seoul, Korea. Among them, pretreatment baseline serum B2M was available in 204 patients. Progression-free survival (PFS) and overall survival (OS) were compared according to the level of B2M with cut-off value of 2.5 mg/L.

Results: Median age of study population was 51 year-old (range, 16-81) and 85 (42%) patients were male. Thirty (15%) patients had nodal MZL and 174 (85%) had non-gastric (NG)-MZL. MZL patients with BCR-ABL positive chronic phase who are not complete molecular response to Imatinib treatment.

Conclusions: No significant effect of the C494T mutation and the T932C mutation with a single mutation of the tyrosine kinase drug resistance. There is influence of the T1052C single mutation to tyrosine kinase drug resistance.

OS-HEM-08  Hematology

Influence of Underlying Diseases and Vital Organ Involvement in the Survival of 612 Patients with Systemic Amyloidosis (RAMYD-Geas-Semi)

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Background: To analyze mortality and risk factors in a large series of patients with amyloidosis diagnosed in Internal Medicine Departments.

Methods: The national registry of amyloidosis patients (RAMYD) of the Study Group on Autoimmune Diseases of the Spanish Society of Internal Medicine included a total of 612 patients (331 men and 281 women, mean age at diagnosis of 64 years) on June 15, 2014.

Results: Information on the vital status of patients could be obtained in 523 cases, of which 325 (62%) died. Epidemologically, there were no significant differences with respect to gender, with a higher rate of mortality in older patients (67.28 vs. 57.57 years, p<0.001). A higher mortality rate was observed in patients with chronic/degenerative diseases in comparison with other etiologies (84% vs. 59%, p<0.001). The highest mortality rates were observed in patients with renal involvement (78% vs. 59%, p<0.001) and cardiac involvement (78% vs. 61%, p=0.001), while lower mortality rates were observed in patients with peripheral neuropathy (47% vs. 70%, p<0.001) and skin