

Reduced intensity conditioning (RIC) HSCT.

Any regimen with 50% or less equivalence to a standard conditioning regimen is considered reduced intensity. This includes not only the 50% reduction of the total dose of a given drug (or TBI), but also the use of a single drug in a standard dose but without other drugs (or TBI) usually included in the standard protocol.

The standard conditioning regimens vary according to the disease, so the reduced intensity regimens will also vary. The addition of ATG or any mono or polyclonal antilymphocyte antibody or the addition of purine analogues do not change the intensity category.

In Appendix ### we list established regimens for selected diseases. The above definition can be applied also to published protocols not included in this Appendix.

Appendix ###**Standard intensity conditioning regimens (established regimens)**

Leukemias:	Busulfan (16 mg/kg) + cyclophosphamide (120-200 mg/kg) Cyclophosphamide (120 mg/kg) fractionated, TBI 12 cGy (fractionated) ± ATG Etoposide VP-16 (30-60 mg/kg)
CLL	TBI 10-14 cGy +/- x; BU16 +/- x. (16 mg/kg)
Lymphomas:	BEAM polychemotherapy ± ATG <ul style="list-style-type: none"> - BCNU (300 mg/m²) - Etoposide (6-800 mg/m²) - Ara-C (800-1600 mg/m²) - Melphalan (100-140 mg/m²) CBV polychemotherapy ± ATG <ul style="list-style-type: none"> - Cyclophosphamide - Etoposide - BCNU Busulfan (16 mg/kg) + cyclophosphamide (120-200 mg/kg) ± ATG Cyclophosphamide (120 mg/kg) + TBI 12 cGy (fractionated) ± ATG
Myeloma:	Melphalan (200 mg/m ²)
Solid tumours:	Cyclophosphamide (60-120 mg/kg) Fludarabine (120 mg/kg)
Aplastic anemia non-constitutional:	Cyclophosphamide (200 mg/kg ± ATG)
Congenital disorders:	Busulfan (14-16 mg/kg) + cyclophosphamide (120-200 mg/kg) ± ATG

Autoimmune diseases:

- MS: BEAM ± ATG
- BCNU (300 mg/m²)
 - Etoposide (6-800 mg/m²)
 - Ara-C (800-1600 mg/m²)
 - Melphalan (100-140 mg/m²)
- Others: Cyclophosphamide (200 mg/kg) + ATG
- Bulsufan (16 mg/kg) + cyclophosphamide (120-200 mg/kg) + ATG
- Cyclophosphamide (120 mg/kg) + fractionated TBI 12 cGy + ATG

Reduced intensity conditioning transplants

Only regimens with dosages equal or below these limits should be classified as RIC HSCT.

- Leukemias** Busulfan ≤ 8 mg/kg ± TBI ≤ 6 cGy (fractionated) ± purine analogue ± ATG
- Cyclophosphamide ≤ 60 mg/kg ± TBI ≤ 6 cGy (fractionated) ± purine analogue ± ATG
- TBI ≤ 6 cGy (fractionated) ± purine analogue ± ATG
- Lymphoma** Busulfan ≤ 8 mg/kg ± TBI ≤ 6 cGy (fractionated) ± purine analogue ± ATG
- Cyclophosphamide ≤ 60 mg/kg ± TBI ≤ 6 cGy (fractionated) ± purine analogue ± ATG
- TBI ≤ 6 cGy (fractionated) ± purine analogue ± ATG
- Melphalan 140 mg/m² + fludarabine
- Melphalan 70-140 mg/m² +/- purine analogue +/- Campath 1H
- TBI 2 Gys + FLU 90 mg/m² iv
- Myeloma** Melphalan ≤ 100 mg/m² ± purine analogue ± ATG
- Aplastic anemia non-constitutional:** Cyclophosphamide 1200 mg/m² ± ATG
- Solid tumours** Busulfan ≤ 8mg/kg ± TBI ≤ 6 cGy (fractionated) ± purine analogue ± ATG
- Cyclophosphamide ≤ 60 mg/kg ± TBI ≤ 6 cGy (fractionated) ± purine analogue ± ATG
- TBI ≤ 6 cGy (fractionated) ± purine analogue ± ATG

There are no general recommendations for other disease categories.