

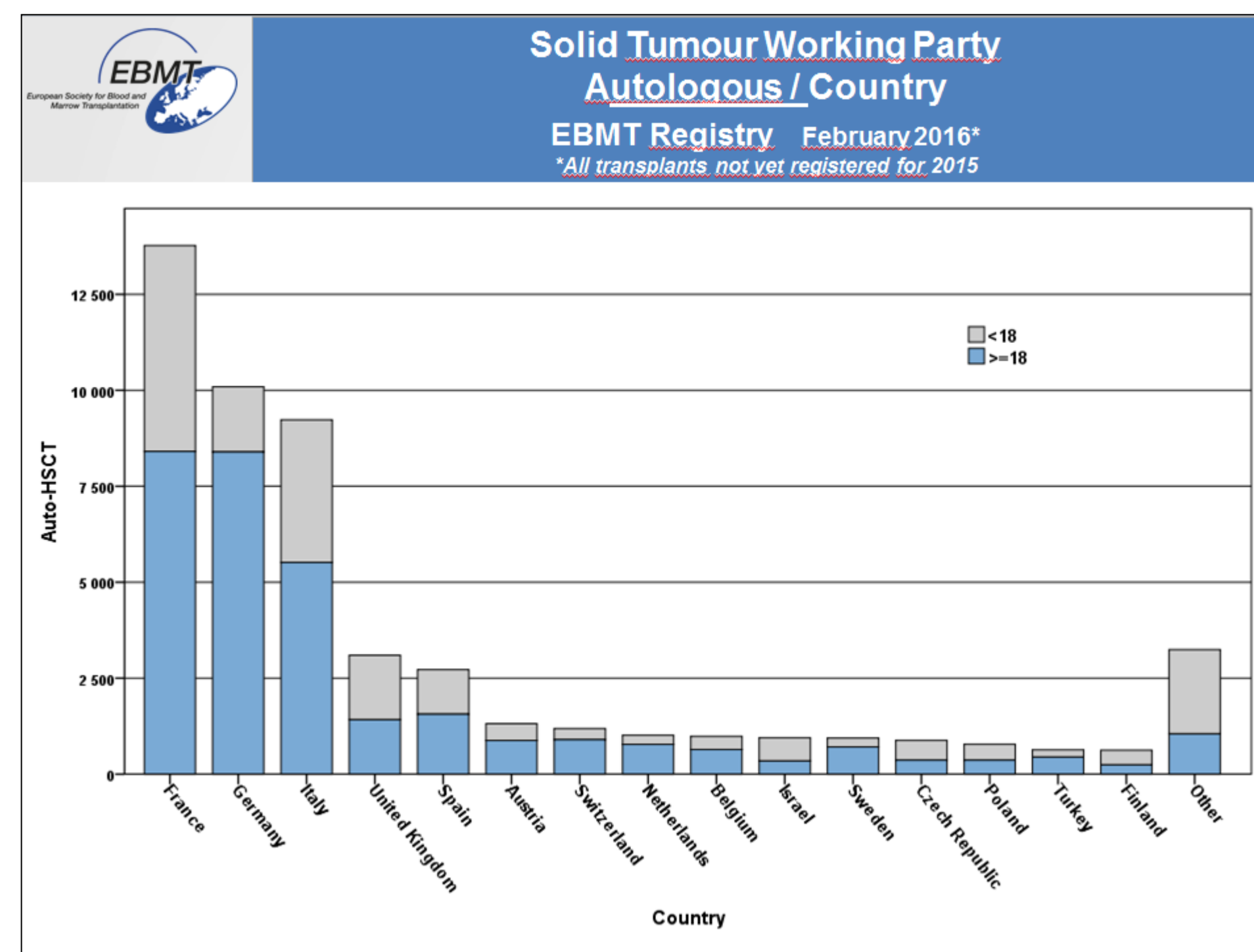
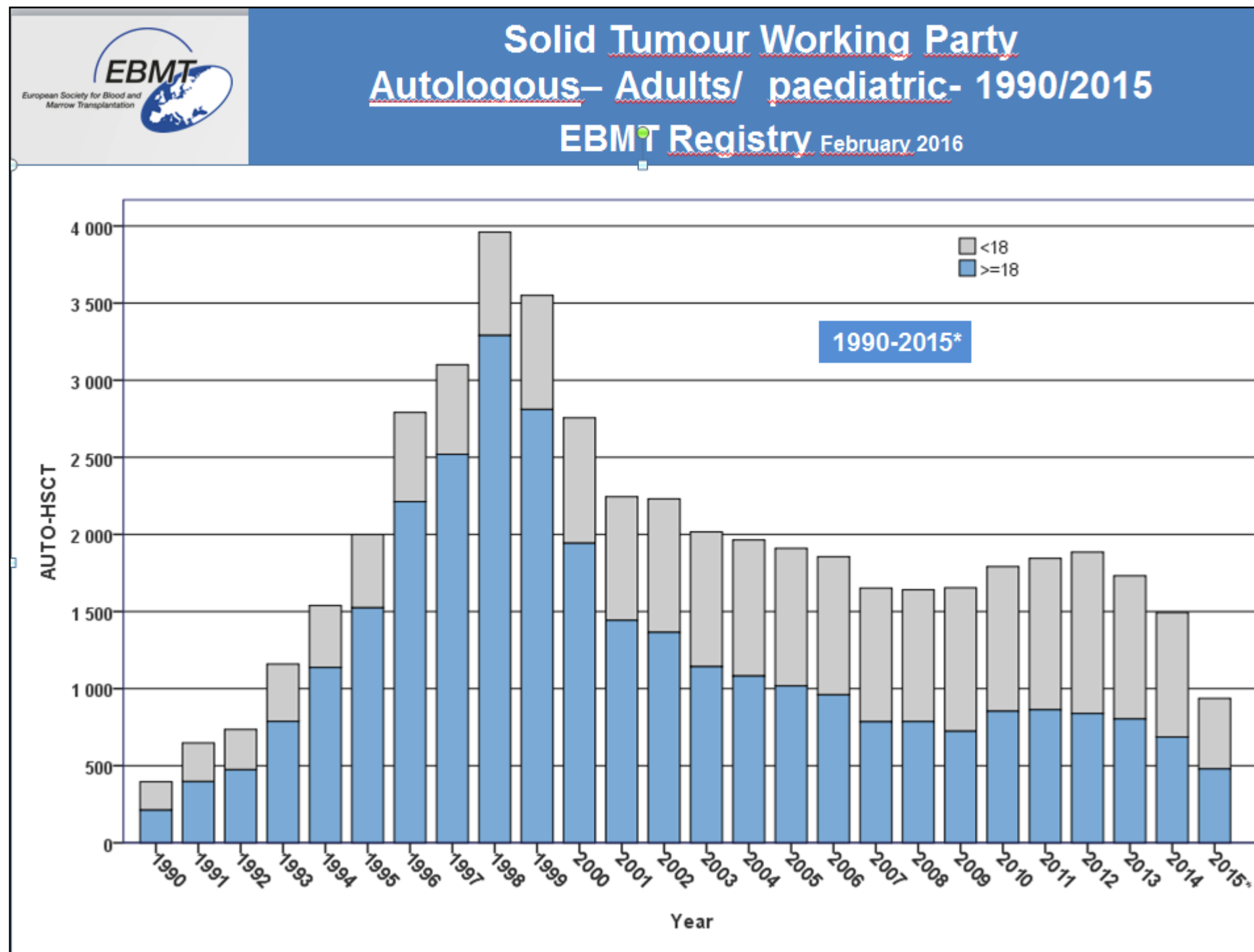


Solid Tumours Working Party

Chair : Francesco Lanza
Secretary : Paolo Pedrazzoli

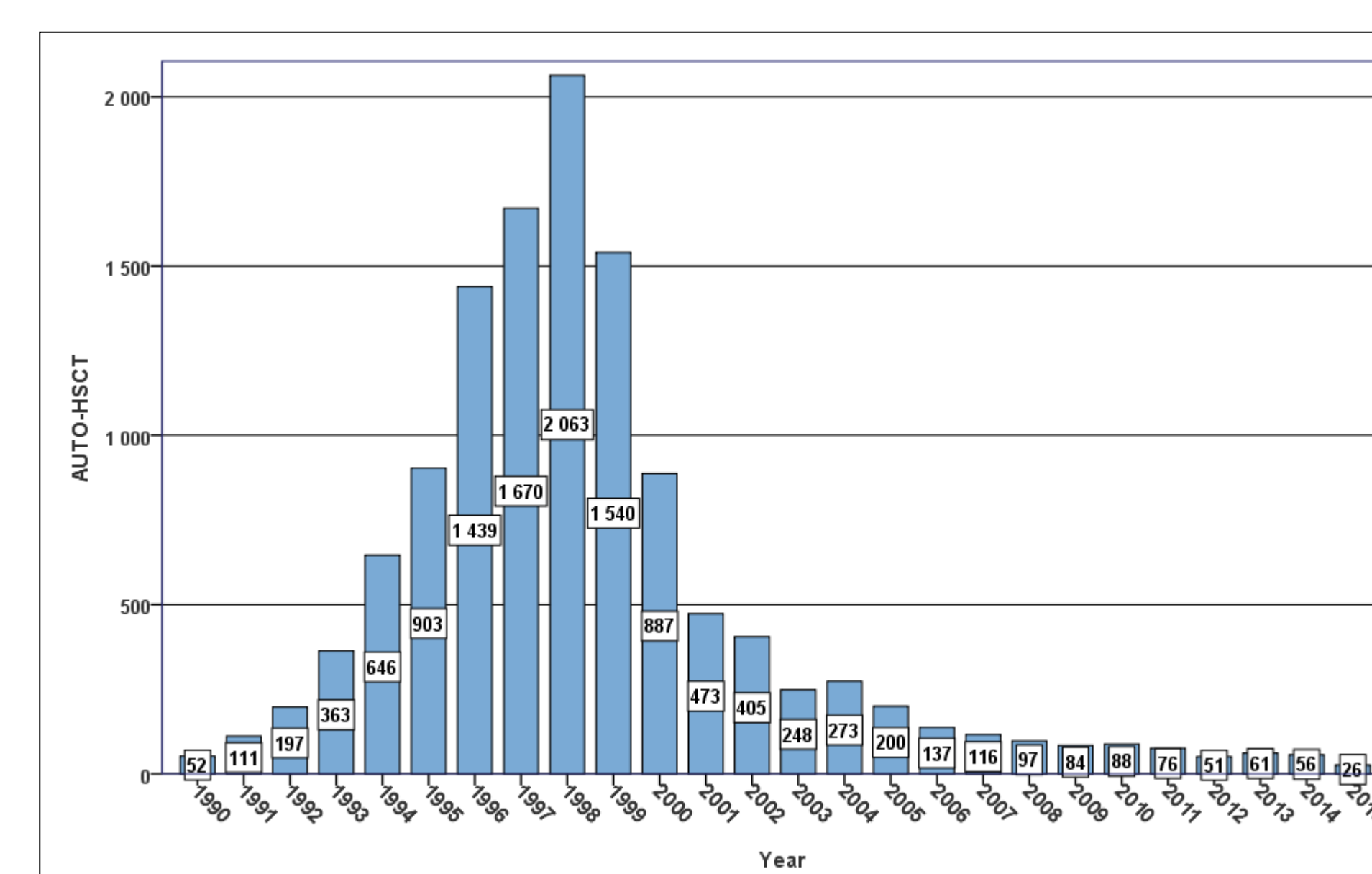
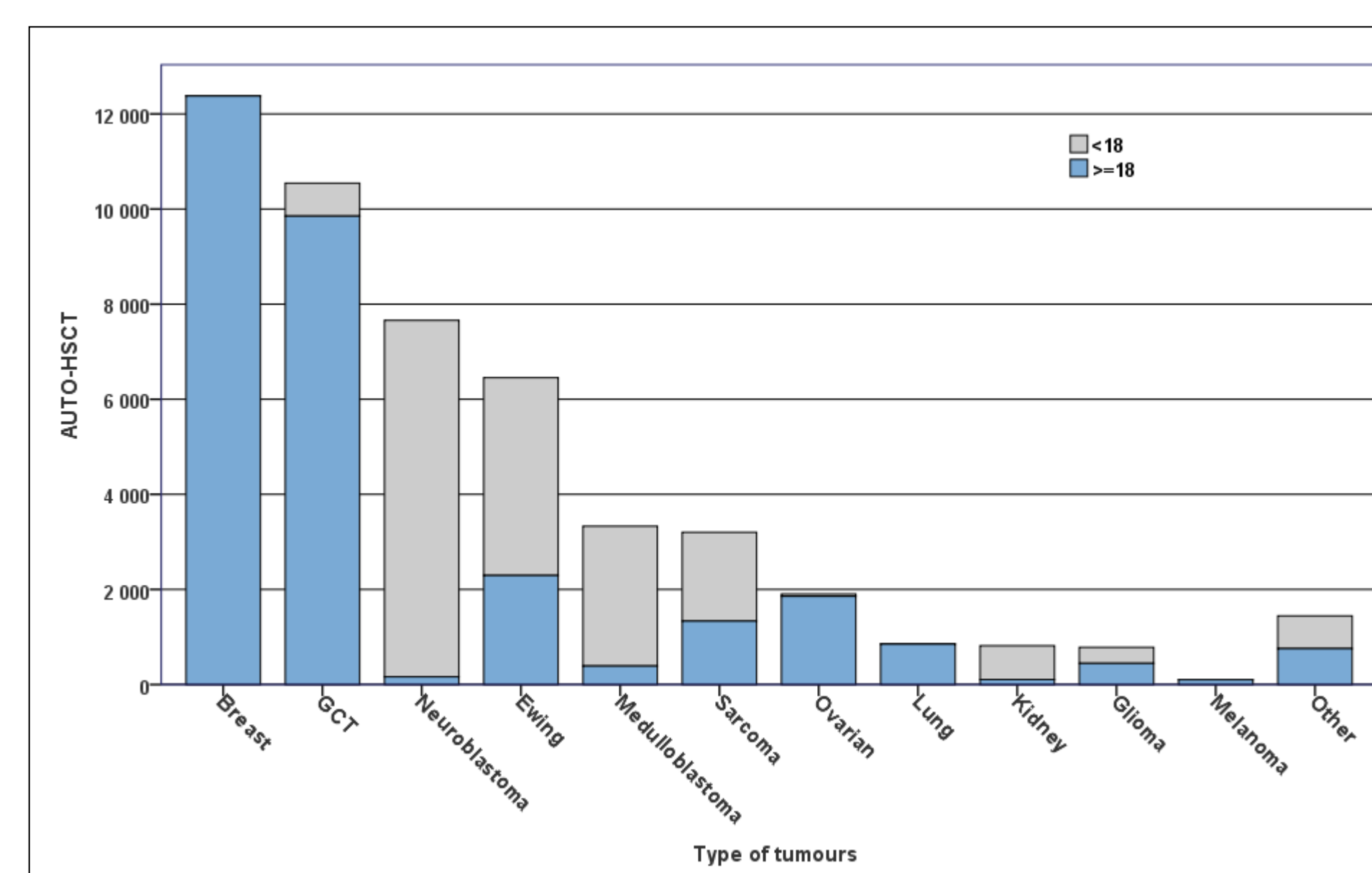
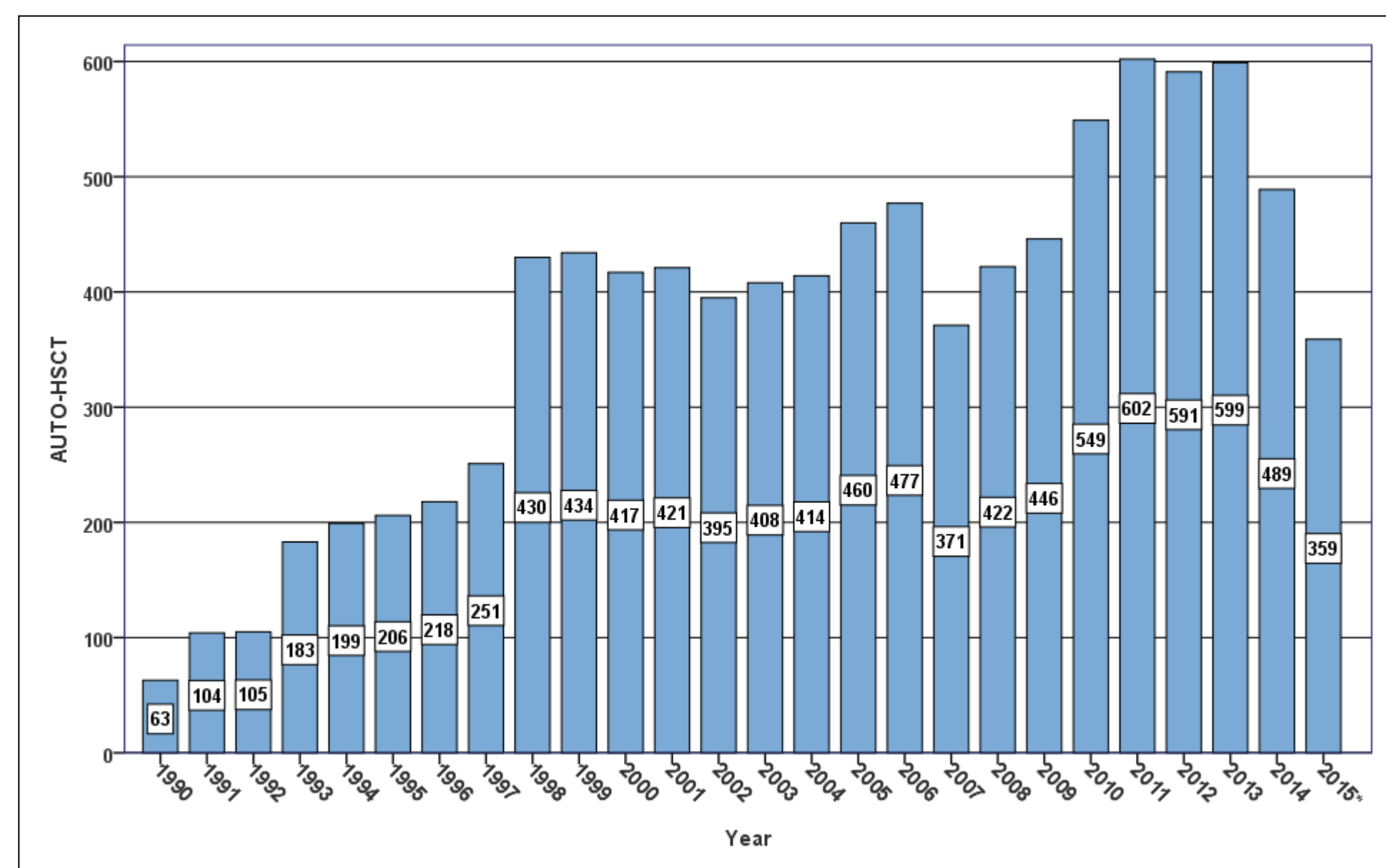
EBMT REGISTRY - SOLID TUMOURS (n = 53 368)

EBMT Registry-Solid Tumour Working Party February 2016* (*Partial for 2015)		
Solid tumour Registry	53 409	
Patients	39 047	
Adults/Paediatric (%)	60 / 40	
Male/Female (%)	47 / 53	
Auto / Allo (%)	97 / 3	
Nb of HSCT	Auto (n=51 168)	Allo (n=1 714)
First HSCT	37 913	1116
Second HSCT	9 393	457
Third HSCT	3 278	105
Fourth HSCT	588	27
> Fifth HSCT	190	11
Median follow up (yr)	2,2 (<1-34)	1 (<1-31)



Studies

- 1- Hematopoietic stem cell collection and engraftment results in patients with germ cell tumors (GCT) who are candidates to myeloablative chemotherapy
- 2- Long-term results of salvage high-dose chemotherapy for a) pediatric/adolescent and b) female- germ cell tumor patients
- 3- Retrospective analysis of data on high-dose chemotherapy and autologous hemopoietic progenitor cell transplantation for Metastatic Breast Cancer : *The number of cases so far reported is low, some data are missing, and M. Martino will contact the centres soon after the EBMT meeting to get a more comprehensive data set.*
- 4- High-dose chemotherapy and autologous hematopoietic stem cell transplantation as adjuvant treatment in high-risk Breast Cancer
- 5- Incidence and prevalence of therapy-related Myeloid Neoplasms and myelodysplastic/myeloproliferative diseases (t-MN) in Breast Carcinoma (BC) patients as a consequence of exposure to alkylating agents, topoisomerase II inhibitors and/or ionizing radiations, including high-dose chemotherapy regimens followed by autologous stem-cell transplantation



Germinal Cell Tumor (GCT)

The main aims of STWP research activity in 2015 was to address the prognostic significance of response to induction chemotherapy (CT) preceding salvage high dose CT (HDCT) courses, and prior taxane (TXL)-CT for advanced GCT, as this knowledge can inform trial design, stratification and eligibility criteria to HDCT. While PD to induction CT was independently prognostic for PFS and OS, TXL-regimens before HDCT did not affect the outcome. Stratification of trials for the latter factor did not appear to be required when accounting for the other clinical predictors. We demonstrated that the majority of patients with PD to induction chemotherapy usually progress after HDCT. In conclusion, in this population-based analysis we observed that results of HDCT as salvage therapy administered in the last 10 years were not influenced by the increasing use of taxane-containing salvage chemotherapy preceding HDCT. Moreover, while we have confirmed HDCT as a substantially effective strategy irrespective of the number of prior regimens, an additional prognostic factor for clinical use was provided that was represented by the response to induction chemotherapy administered as part of the transplantation strategy.

Breast Cancer

In 2015, STWP conducted a retrospective study with the main goal to assess toxicity and efficacy of adjuvant high-dose chemotherapy (HDC) and autologous hematopoietic stem cell transplantation (AHSCT) in 583 high-risk breast cancer (BC) patients (>3 positive nodes) who were transplanted between 1995 and 2005 in Europe. Subgroup analysis demonstrated that OS was significantly better in patients with endocrine-responsive tumors, less than 10 positive lymph nodes and smaller tumour size. HER2 status did not affect survival probability. Adjuvant HDC with AHSCT has a low mortality rate and provides impressive long-term survival rates in patients with high-risk BC. Our results suggest that this treatment modality should be considered in selected high-risk BC patients and further investigated in clinical trials. Along with some more recent phase III studies, retrospective analysis and, to some extent, the results from meta-analysis, our results suggest a potential role for HDCT and AHPCT in high-risk BC.

Publications

- 1- **Is Allogeneic Transplant for Solid Tumors still alive?** Marco Bregni, Manuela Badoglio, Paolo Pedrazzoli, Francesco Lanza, on behalf of the STWP of the EBMT. *Bone Marrow Transplantation* 2015, 2016 Jan 25.
- 2- **High-dose chemotherapy and autologous HSCT as adjuvant treatment in high-risk breast cancer: data from the EBMT registry.** Massimo Martino, Paolo Pedrazzoli, Marco Bregni, Lorenzo Pavesi, Mustafa Öztürk, Alberto Bosi, Didier Blaise Ugo De Giorgi, Rubén Leno Núñez, Harry C. Schouten, Daniele Generali, Giovanni Rosti, Andrea Necchi, Carmelo Bengala, Manuela Badoglio, Francesco Lanza; on behalf of the EBMT. *Biology Blood Marrow Transplantation* 2015 Dec 23. pii: S1083-8791(15)01878-9.
- 3- **Prognostic impact of progression to induction chemotherapy and prior paclitaxel therapy in patients with germ cell tumors receiving salvage high-dose chemotherapy in the last 10 years: a study of the EBMT.** Andrea Necchi,¹ Rosalba Miceli,¹ Marco Bregni,² Lars Arne Berger,³ Karin Oechsle,³ Kathrin Schumacher,⁴ Edward Kanfer,⁵ Jean Henri Bourhis,⁶ Christophe Massard,⁶ Daniele Laszlo,⁷ Aude Flechon,⁸ Fikret Arpacı,⁹ Simona Secondino,¹⁰ Patrick Wuchter,¹¹ Peter Dreger,¹¹ Martina Crysandt,¹² Nina Worel,¹³ William Krüger,¹⁴ Mark Ringhoffer,¹⁵ Ali Unal,¹⁶ Arnon Nagler,¹⁷ Antonio Campos,¹⁸ Anders Wahlin,¹⁹ Mariagrazia Michieli,²⁰ Gulsan Sucak,²¹ Irene Donnini,²² Rik Schots,²³ Norbert Ifrah,²⁴ Manuela Badoglio,²⁵ Massimo Martino,²⁶ Daniele Raggi,¹ Patrizia Giannatempo,¹ Giovanni Rosti,²⁷ Paolo Pedrazzoli, Francesco Lanza,²⁸ on behalf of the EBMT STWP. *Bone Marrow Transplantation* 7 December 2015
- 4- **Breast cancer circulating biomarkers: advantages, drawbacks, and new insights.** Andrea Ravelli, James M Reuben, Francesco Lanza, Simone Anfossi, Maria Rosa Cappelletti, Laura Zanotti, Angela Gobbi, Chiara Senti, Paola Brambilla, Manuela Milani, Daniele Spada, Paolo Pedrazzoli, Massimo Martino, Alberto Bottini, Daniele Generali. *Tumor Biology* 08/2015.
- 5- **High-Dose Chemotherapy With Autologous HSCT for High-Risk Primary Breast Cancer.** P Pedrazzoli, M Martino, S Delfanti, D Generali, G Rosti, M Bregni, F Lanza. *Journal of the National Cancer Institute*. Monographs 2015 (51), 70-75
- 6- **Immune-related strategies driving immunotherapy in breast cancer treatment: a real clinical opportunity** Andrea Ravelli, James M Reuben, Francesco Lanza, Simone Anfossi, Maria Rosa Cappelletti, Laura Zanotti, Angela Gobbi, Manuela Milani, Daniele Spada, Paolo Pedrazzoli, Massimo Martino, Alberto Bottini, Daniele Generali. *Expert Review of Anticancer Therapy*, 15(6):1-14.
- 7- **HSCT in Europe 2013: recent trends in the use of alternative donors showing more haploidentical donors but fewer cord blood transplants.** JR Passweg, et al. *Bone Marrow Transplantation* 02/2015; 50(4)
- 8- **Indications for allo-and auto-SCT for haematological diseases, solid tumours and immune disorders: current practice in Europe, 2015.** A Sureda, et al. *Bone Marrow Transplantation* 03/2015; 50(8).