Complications & Quality of Life Working Party

European Society for Blood and Marrow Transplantation

Chair: Rafael Duarte
Secretary: Grzegorz Basak
Statistician: Myriam Labopin

GVHD subcomittee: Hildegard Greinix
Late Complications subcommittee: Nina Salooja
Regimen-related toxicity & supportive care subcommittee: Tapani Ruutu

Association between Uric Acid Levels and Graft-versus-Host Disease

PI: Olaf Penack

*** This study is still recruiting ***

Recently, it has been demonstrated in preclinical models that uric acid contributes to GvHD. In this planned prospective study, uric acid levels will be assessed of patients undergoing allo-SCT. The uric acid levels will be correlated to clinical outcome.

Aim: To assess if uric acid levels are associated with incidence and severity of Acute GvHD

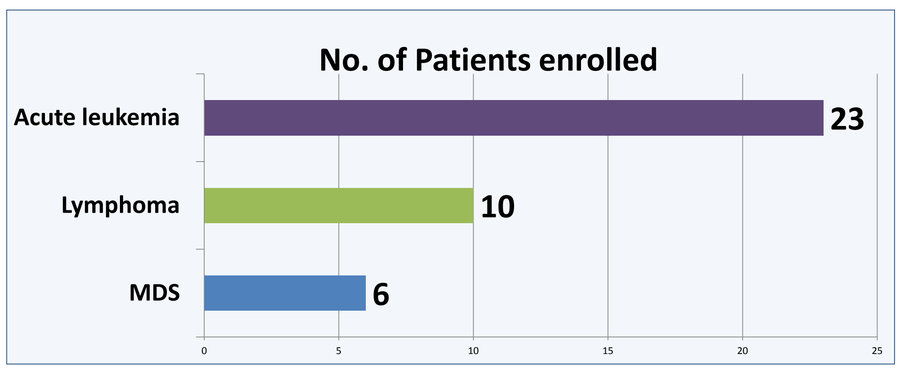
Inclusion criteria:

- First allo-SCT from HLA-matched sibling donors given stem cell grafts (BM or PB) without T-cell depletion
- Patients with acute leukemia, MDS or lymphoma
- Myeloablative or dose-reduced non-myeloablative conditioning

Current status

34 sites participating hoping to collect **409** patients

Currently **39** patients enrolled



Sexual functioning after HSCT

This is a joint study between the CQWP and the Nurse Group of the EBMT

PI: Corien Eeltink and Jacqui Stringer

*** This study is still recruiting ***

Sexual dysfunction has increasingly been recognized as a complication of allogeneic stem cell transplantation with negative impact in their quality of life. The sexual partner might also contribute to sexual dysfunction or to sexual inactivity. Furthermore, patients and their partners have reported to be disappointed by the lack of information, support, and practical strategies provided by health professionals to assist them to cope with the sexual changes they experienced.

Aim:

1) To explore patients' and their partners' opinions on their sexual functioning 2 till 4 and 14 till 16 years post Allogeneic HSCT
2) To evaluate if discussion, adequate help or counseling with regard to sexual function between the health care provider and the survivor has taken place

Inclusion criteria:

- Age ≥ 18 years
- Time of follow up 2 - 4 or 14 - 16 years after transplantation at time of data collection
- Ability to read and write in English, French, German or Dutch
- No cognitive impairment

Incidence and outcome of pregnancy following stem cell transplantation

PI: Nina Salooja

*** This study is still recruiting ***

It is more than 10 years since data on pregnancy after SCT were collected and the CQWP wishes to repeat the study.

Primary Aim is to estimate: The incidence and outcome of pregnancy after specific chemo-radiotherapy protocols for SCT including reduced intensity conditioning

Secondary Aim is to estimate:

1. The incidence and outcome of pregnancies after SCT using artificial reproductive techniques
2. The prevalence of congenital abnormalities in offspring born after SCT
3. The risk of adverse haematological outcome in pts who conceive after transplantation

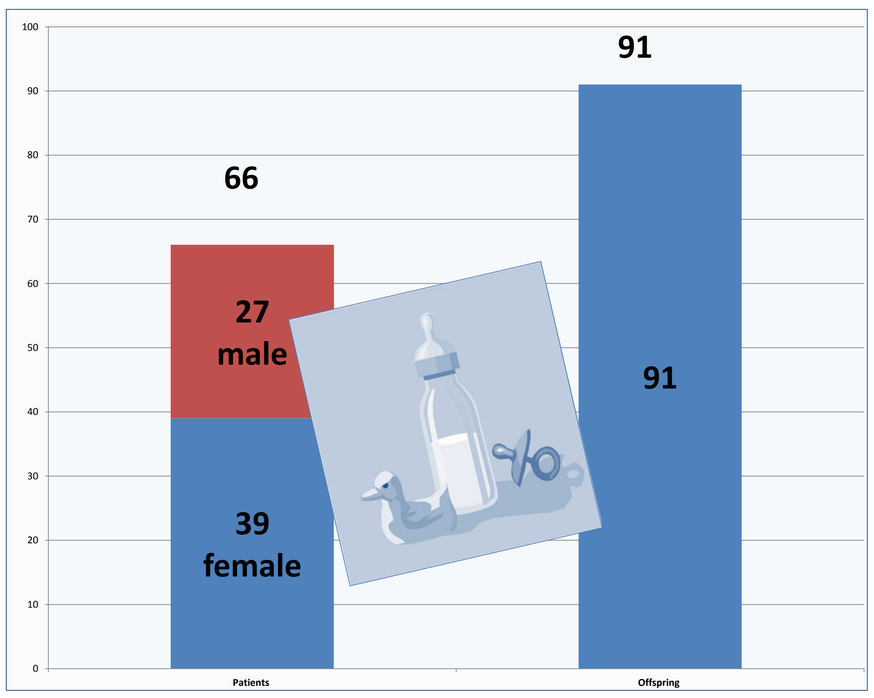
Inclusion criteria:

- Patient has undergone an autologous and/or allogeneic SCT between **1994** and **2014**
- Female patient who has carried children in her own uterus
- Male patient who has used his own sperm to father a child

Current status

118 sites participating hoping to collect **> 600** pregnancies

Currently **66** patients enrolled with **91** pregnancies



CQWP Data office

For participation in, or information on CQWP studies, please contact the CQWP at the EBMT Data Office in Leiden, The Netherlands;

Study coordinator: Steffie van der Werf
Data manager: Anja Henseler

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Registration forms at the >> EBMT booth <<