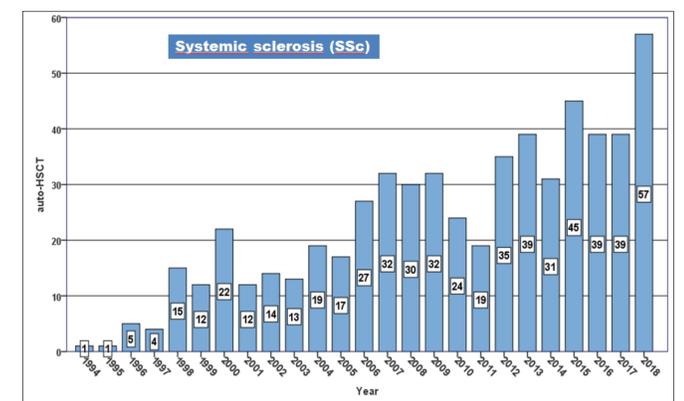
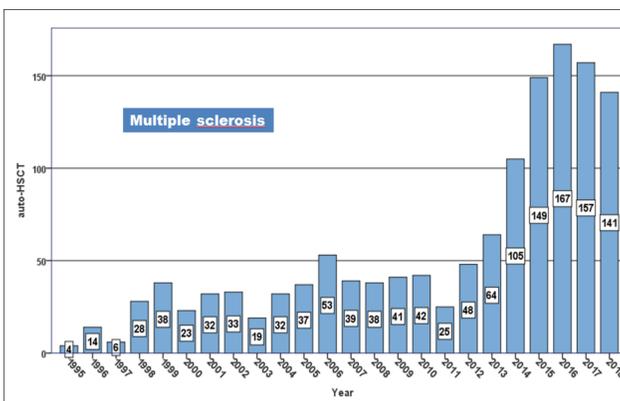
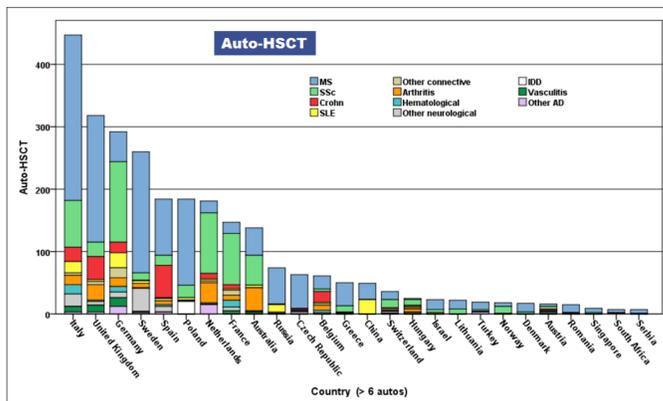
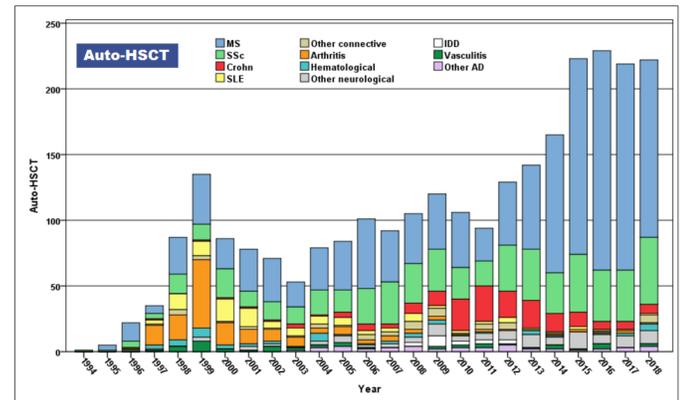


Number of HSCT for autoimmune diseases : 2899 EBMT Registry - February 2019

Transplant procedures	2899	
Patients	2842	
Male/Female %	40/60	
Paediatric/ adult / %	10/90	
Centres /Countries	287/ 41	
Overall follow up (median, Yr HSCT < 2017)	3y (<1-23)	
	Autografts n=2709	Allografts n=189
First	2685	157
Second	22	26
Third	1	6
Median age at 1st transplant	38y (3-76)	11y (<1-64)

▶ MULTIPLE SCLEROSIS	1348	▶ HAEMATOLOGICAL	118
▶ CONNECTIVE TISSUE	762	IIP	35
SSc	585	AIHA	27
SLE	118	Evans'	25
PM-DM	18	Other	31
Siogren	5	▶ VASCULITIS	59
Antiphosph. Syndrome	6	Wegener's	14
Other/Unknown	30	Behçet's	11
▶ ARTHRITIS	189	Takayasu	3
Rheumatoid arthritis	82	Polyarteritis	4
Juvenile chronic arthritis:		Churg-Strauss	2
*Systemic JIA	62	Other/Unknown	25
*Other JIA	18	▶ OTHER NEUROLOGICAL	120
*Polyarticular JIA	17	NMO	26
Psoriatic arthritis	3	CIDP	56
Other	7	Myasthenia gravis	8
▶ INFLAMMATORY BOWEL	228	Other/Unknown	30
Crohn's disease	185	▶ INSULIN DEPENDENT DIABETES	20
Ulcerative colitis	4	▶ OTHER	55
Other	39		



Principal research studies

- Allogeneic HSCT for Autoimmune Diseases (ADWP with PDWP/IEWP collaboration).
- Autologous HSCT for ANCA-positive vasculitis
- Autoimmune cytopenias (AIC) following allogeneic haematopoietic stem cell transplant for acquired aplastic anaemia (ADWP/SAAWP collaboration)
- Autologous HSCT for progressive systemic sclerosis: a prospective non-interventional study across Europe (NISSC)
- NISSC-2: Post AHSCT management and mechanistic immunological reconstitution for patients with systemic sclerosis.
- Comparison of Cyclo+ATG vs BEAM+ATG conditioning regimens in autologous HSCT for Multiple Sclerosis.
- Late complications after autologous HSCT for autoimmune diseases: a retrospective survey from the ADWP and TCWP
- Retrospective studies of autologous HSCT for
 - Polymyositis-Dermatomyositis
 - Behçet's Disease retrospective study
 - Rare AD neurological disorders
 - Immune cytopenias
- Viral reactivations following HSCT for autoimmune disease: a retrospective EBMT survey
- Guidelines for
 - Neurological diseases
 - Paediatric autoimmune diseases (ADWP with IEWP/PWP collaboration)
- ASTICLite: The EBMT is funded (96000 euros) to support the data collection and analysis in the long-term follow up study of this UK NIHR randomised controlled clinical trial of autologous HSCT in Crohn's disease.

Major achievements

- The ADWP continues to expand the evidence-base and established the field with both registry-based studies and guidelines written with disease specialist. Autoimmune diseases (ADs) are now the fastest growing indication for HSCT (Passweg et al, 2018), reflecting a significant change in transplant practice over the 20 years of evolution and the active role of the ADWP continues to play in bringing together active EBMT centres and disease specialist communities.
- The ADWP section of the EBMT registry is the now the largest database of its kind worldwide with almost 3,000 transplants currently reported. Special consideration has been given to the future EBMT registry developments in order to accommodate the needs of the multispeciality interactions for sustainable long-term data collection in patients with ADs undergoing HSCT and other cell therapies.
- Education continues to be central to the ADWP activities with multiple educational meetings globally. In November 2018, the ADWP educational meeting, organised jointly in Florence with SAAWP, attracted the greatest number of delegates ever reflecting growing interest in the field by both transplant haematologists and disease specialists. The ADWP will repeat the event in Berlin on 31 October - 1 November 2019.
- The ADWP is also fully engaged in other EBMT activities, including the E-learning portal, the EBMT Curriculum and the EBMT Handbook. There has also been productive interaction with the EBMT Nurses Group and Patient, Family and Donor Committee.
- "Implementation science" is now needed to define how to best to deliver HSCT in the context of biological and other modern therapies for AD. The future will depend on safety and quality of care, including refinement of transplant techniques. Therefore the ADWP continues to work closely with JACIE and disease specialist groups to assure best practice and quality of outcomes.

Recent key publications

- HSCT for autoimmune diseases - Clinical experience and mechanisms, Alexander T, *Journal of Autoimmunity* 2018 Aug; 92:35-46.
- Autologous HSCT for Crohn's Disease: A Retrospective Survey of Long-term Outcomes from the EBMT. Brierley CK, *J Crohns Colitis*. 2018 May 18
- Autologous HSCT) in Severe Crohn's Disease: A Review on Behalf of ECCO and EBMT. Snowden JA; European Crohn's and Colitis Organisation (ECCO); EBMT; ADWP Joint Accreditation Committee of the International Society for Cellular Therapy (ISCT) and EBMT (JACIE). *J Crohns Colitis*. 2018 Mar 28;12(4):476-488.
- Immune Reconstitution After HSCT in Crohn's Disease: Current Status and Future Directions. A Review on Behalf of the EBMT ADWP and the Autologous HSCT In Refractory CD-Low Intensity Therapy Evaluation Study Investigators, Pockley AG, *Front Immunol*. 2018 Apr 4;9:
- General information for patients and carers considering HSCT for severe ADs: A position statement from the EBMT ADWP, the EBMT Nurses Group, the EBMT Patient, Family and Donor Committee and the Joint Accreditation Committee of ISCT and EBMT (JACIE). H Jessop, *Bone Marrow Transplant*. 2019 Jan 31.