Non-indication Diagnoses

Guide to the completion of the EBMT data collection form:
Nonindication_Diagnoses_v1.0

25 August 2023

EBMT Registry
EBMT Clinical Research & Registry Department
Table of Contents

Non-indication diseases.............................................................................................................3
Classification...............................................................................................................................3
  1. Date of diagnosis.................................................................................................................3
  2. Diagnosis classification .....................................................................................................3
Non-indication diagnoses

The non-indication diagnosis form is to be used if this is indicated in the EBMT Registry or on its data collection forms. The form can be used to report any disease the patient may have had prior to the disease the patient was treated for, or a disease that was the result of a treatment (secondary malignancy).

Classification

1. Date of diagnosis

Enter the date the disease was diagnosed.

2. Diagnosis classification

Select the diagnosis classification that is appropriate and check the box next to it.

- **Acute leukaemia**: Acute leukaemia is a malignant disease that originates either in a lymphopoietic stem cell (Precursor lymphoid neoplasms (PLN), previously ALL) or in a hematopoietic stem cell or progenitor cell (acute myeloid leukaemia, AML);
- **Autoimmune disorder**: Autoimmune disorders (ADs) are disorders where the body’s immune system attacks its own tissue;
- **Bone marrow failure**: Bone marrow failure syndromes are disorders of the hematopoietic stem cells leading to cytopenia that can involve one or more cell lineages. They can be acquired (non-constitutional) or genetic (constitutional);
- **Chronic leukaemia**: Chronic leukaemia is a malignant disease that originates from either the bone marrow, lymphocytes or prolymphocytes. It can be divided into chronic myeloid or chronic lymphocytic leukaemia. For the purposes of reporting anonymous events, prolymphocytic leukaemia can be reported as ‘other’;
- **Haemoglobinopathies** are a heterogeneous group of inherited diseases characterised by alteration of haemoglobin production;
- **Lymphomas** are malignant neoplasms of the lymphatic system, which includes lymph nodes, spleen, thymus, Waldeyer's ring, appendix, and Peyer's patches. Lymphomas are divided into two subgroups: Hodgkin lymphoma (HL) and Non-Hodgkin lymphomas (NHL);
- **Myelodysplastic syndrome/myeloproliferative neoplasm** (MDS/MPN) are a group of chronic clonal myeloid malignancies in which there are features of both MDS and MPN at the time of presentation. This category was originally composed of the following major myeloid disorders: chronic myelomonocytic leukaemia (CMML), juvenile myelomonocytic leukaemia (JMML), MPNMD with ring sideroblasts and atypical chronic myeloid
leukaemia (aCML). Myeloid disease that shows features of both MDS and MPN but does not meet the criteria for any of the major MDS/MPN entities is designated as myelodysplastic/myeloproliferative neoplasm, unclassifiable (MDS/MPN-U);

- **Myelodysplastic syndrome** (MDS) is a heterogeneous group of clonal haematopoietic stem cell disorders characterised by ineffective, dysplastic haematopoiesis, peripheral cytopenia and a variable rate of progression to acute myelogenous leukaemia (AML);

- **MPN**: Myeloproliferative neoplasms (MPNs) include a group of haematological disorders originating from a pluripotent stem cell of haematopoiesis that typically present with a hypercellular bone marrow with fibrosis, hepatomegaly, splenomegaly, and increased blood cell counts (cytopenias are possible);

- **Plasma cell disorder (incl. MM)**: Plasma cell disorders are related to an overproduction of plasma cells in the body and subsequently a possible overproduction of immunoglobulins;

- **Solid Tumour**: Solid Tumours are a group of malignancies presenting with masses internal or external to organs such as breast, ovarian or lung carcinoma.

3. **Subclassification**

The subclassification needs to be reported in different levels of detail for different diagnoses. For instructions on selecting the appropriate classification, consult the completion guidelines for the diagnosis you want to enter data for.