

## PRESS RELEASE

### Results of the EBMT Transplant Activity Survey 2013

#### **Recent trends in the use of alternative donors showing more haplo-identical donor but fewer cord blood transplants.**

**Barcelona, Monday February 5, 2015** – the transplant activity survey 2013 provides us with the most recent data on activity, transplant rates and indications and focuses on the use of donors other than HLA identical siblings and matched unrelated donors for allogeneic HSCT.

The annual survey continues to provide valuable and up-to-date information on use of hematopoietic stem cell transplantation throughout Europe. It not only reflects current practice but also provides essential material for health care planning and health policy makers.

658 teams in 48 countries reporting to the 2013 survey performed a total of 39,209 transplants in 34,809 patients. Of these, 16,211 (41%) were allogeneic; 22,998 (59%) autologous. This is an increase of 3.7% (5.6% allogeneic HSCT and 2.4% autologous HSCT) when compared to 2012 and 26% when compared to five years previously indicating that HSCT continues to be an increasingly important treatment modality in the era of targeted antibody and molecular therapy.

Main indications were leukemias; 11,190 (32% of total; 96% of which were allogeneic); lymphoid neoplasias including Non Hodgkin lymphoma, Hodgkin lymphoma, and plasma cell disorders; 19,958 (57%; 11% allogeneic); solid tumors; 1,543 (4%; 4% allogeneic); and non-malignant disorders; 1,975 (6%; 91% allogeneic). As seen in previous years, the majority of HSCT for lymphoid malignancies were autologous while most transplants for leukemia were performed using stem cells from allogeneic donors. Autologous HSCT for non-malignant disorders predominantly include patients with autoimmune disorders. When compared to 2012 there were increases in allogeneic HSCT for AML in CR1 (10.7%), MPN (11.1%) and NHL (12.5%). For autologous HSCT there was an increase for plasma cell disorders by 6.1% and a decrease in activity for AML (18%) and HD (10%) which may be related to the availability of monoclonal antibodies.

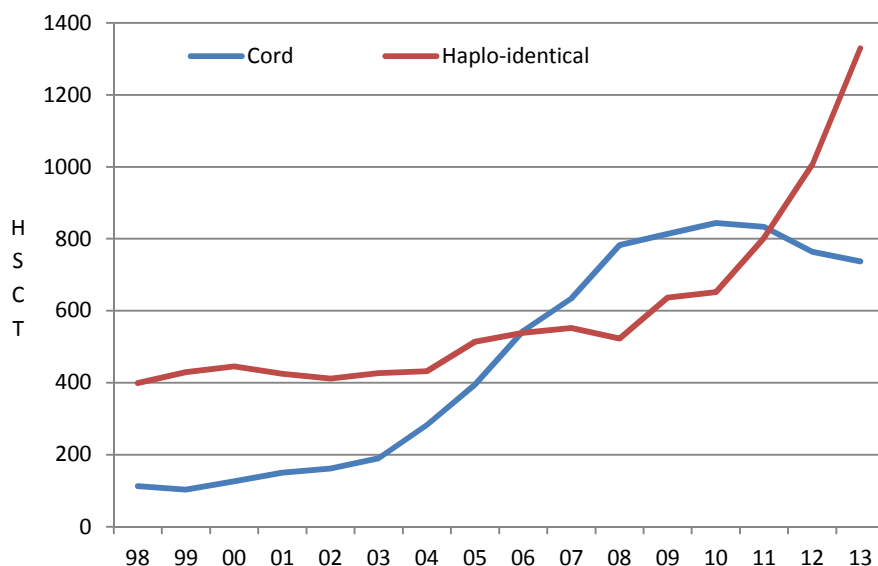
Noteworthy in this years' survey is the increase in the use of allogeneic HSCT more than autologous HSCT thus narrowing the gap in numbers of autologous and allogeneic HSCT and in allogeneic HSCT the increasing use of alternative donor transplants, where an impressive trend for more haplo-identical HSCT has been observed (figure 1a). The increase in haplo-identical HSCT coincides with the publications of the post-transplant cyclophosphamide GvHD prophylaxis in haplo-identical HSCT. This is accompanied by a slight decrease in HSCT using cord blood pointing to the fact that mismatched unrelated cord blood and haplo-identical donors are in competition for patients who do not have a sibling or matched unrelated donor (figure 1b).

Figure 1b shows the use of sibling and unrelated donor HSCT both continuing to increase, please pay attention to the fact that the scale in figure 1a is 5x the scale in figure 1b. When comparing the use of donors for allogeneic HSCT in countries with high transplant rates it is obvious that there are important differences. Some may be explained by availability of sibling donors as there are differences in family size across Europe. There are, however, 3 fold differences in transplant rates for sibling and unrelated donor HSCT among countries and even larger differences in the use of unrelated cord blood and haplo-identical donors probably reflecting availability, financial issues as well as differences in the interpretation of results of recent studies and local experience.

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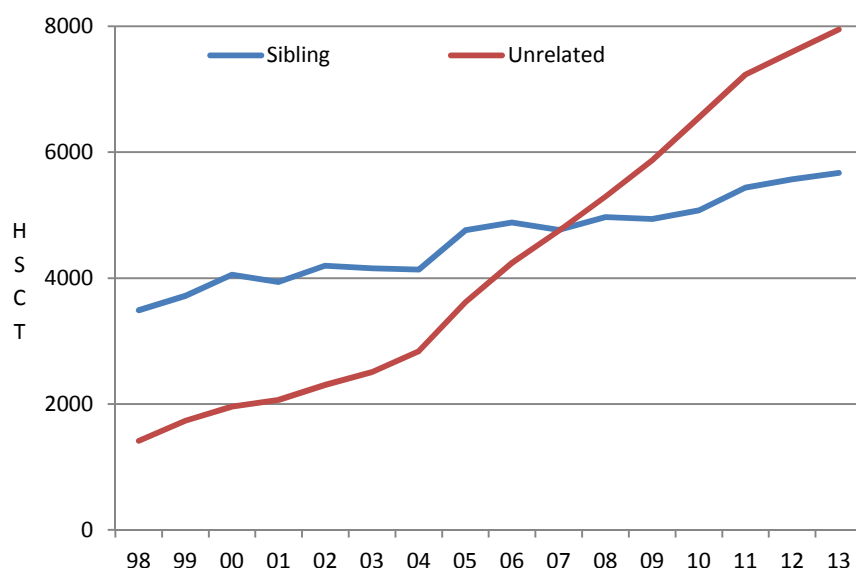
**Figure 1a**

Absolute numbers of haplo-identical and cord blood HSCT in Europe 1998-2013



**Figure 1b**

Absolute numbers of sibling donor and unrelated donor HSCT in Europe 1998-2013



[Hematopoietic SCT in Europe 2013: recent trends in the use of alternative donors showing more haploidentical donors but fewer cord blood transplants.](#)

Passweg JR, Baldomero H, Bader P, Bonini C, Cesaro S, Dreger P, Duarte RF, Dufour C, Falkenburg JH, Farge-Bancel D, Gennery A, Kröger N, Lanza F, Nagler A, Sureda A, Mohty M.

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### About the European society for Blood and Marrow Transplantation (EBMT)

The EBMT is a non-profit organisation that was established in 1974 in order to allow scientists and physicians involved in clinical bone marrow transplantation to share their experience and develop co-operative studies. The EBMT aims to promote all aspects associated with the transplantation of haematopoietic stem cells from all donor sources and donor types including basic and clinical research, education, standardisation, quality control, and accreditation for transplant procedures.

For further information about the EBMT, please visit the website: [www.ebmt.org](http://www.ebmt.org) and follow us on Twitter: [@TheEBMT](https://twitter.com/TheEBMT)

### About the Transplant Activity Survey

In 1990, the EBMT introduced an annual survey to prospectively collect numbers of patients treated with a haematopoietic stem cell transplant (HSCT) according to indication, donor type and stem cell source. Its importance was immediately realised and since then, the survey - known within the transplant community as the Activity Survey - has become a tool for assessing the real picture of HSCT in Europe, recognising trends, illustrating the current status and providing essential data for counselling and planning. Its structure, standardized over many years, and the excellent commitment by the participating teams open the possibility to observe changes over time and to evaluate factors associated with such changes. This Activity Survey is relevant to individual transplant teams, national organisations, health care agencies and the industry as well as patients.

For any further information about the Transplant Activity Survey, please contact:

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