In t(8;21)(q22;q22) acute myeloid leukemia, minimal residual disease monitoring on peripheral blood every 3 months allows to predict hematological relapse and to identify patients who could potentially benefit from intervention therapy.

CBF-2006 study
94 patients with t(8;21)(q22;q22) acute myeloid leukemia prospective monitoring after intensive chemotherapy in first complete remission

Time from end of treatment

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Test for RUNX1-RUNX1T1 minimal residual disease

After treatment completion, bone marrow MRD positivity is not predictive of the risk of relapse

Persistence of peripheral blood complete molecular remission is associated with lower risk of relapse (4-year cumulative incidence, 8.2%)

Molecular relapse confirmed on a following peripheral blood sample predicts hematological relapse (4-year cumulative incidence, 86.9%) within a median time interval of 3.9 months.

Willekens et al., Haematologica, 2016