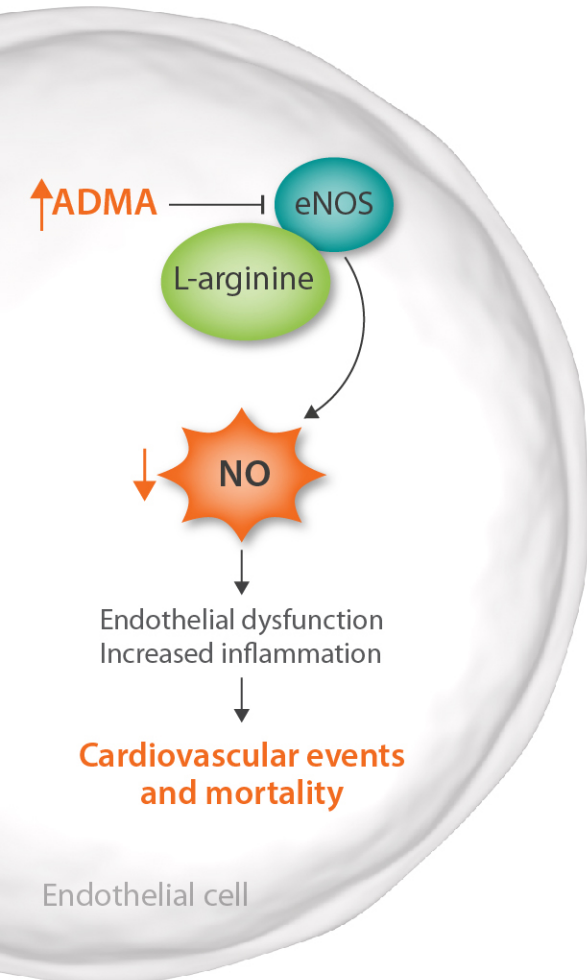



# A retrospective study investigating the impact of pre-transplant serum asymmetric dimethylarginine (ADMA) levels on major outcome measures in the setting of allogeneic stem cell transplantation



 **938** Allografted patients

 Heidelberg (n=518) and Essen (n=420)

 Assessment of pre-transplant serum levels of ADMA and endothelium-related serum factors using ELISA

Median pre-transplant ADMA: 0.73  $\mu\text{M}$  [IQR] 0.59-0.97

**↑ Pre-transplant ADMA levels were associated with:**

**Within the first year post-allogeneic stem cell transplantation**

- Increased risk of non-relapse mortality (HR 1.43 per 1-log<sub>2</sub> increase, P=0.005)
- Worse overall survival (HR 1.45 per 1-log<sub>2</sub> increase, 95%CI 1.21-1.74, P<0.0001)
- Shorter progression-free survival (HR 1.30 95%CI 1.10-1.54, P=0.002)

**Within one year after onset of acute graft-versus-host disease**

- Shorter overall survival (HR 1.46, P=0.001)
- Shorter progression-free survival (HR 1.32, P=0.010)
- Higher non-relapse mortality (HR 1.36, P=0.042)