

Total body irradiation dose escalation decreases risk of progression and graft rejection after hematopoietic cell transplantation for myelodysplastic syndromes or myeloproliferative neoplasms

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Received: June 7, 2018.

Accepted: January 2, 2019.

Pre-published: January 10, 2019.

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SUPPLEMENTARY TABLE 1 for

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Supplementary Table 1. High-risk patient characteristics		
	TBI dose 300-400cGy (n = 17)	TBI dose 450cGy (n = 24)
Sex, n (%)		
Female	9 (53%)	5 (20.8%)
Male	8 (47%)	19 (79.2%)
Diagnosis, n (%)		
High-risk MDS (MDS-EB-1)	11 (65%)	17 (70.8%)
CMML	6 (35%)	7 (29.2%)
Age at transplant, years, median (range)	66 (57–72)	68 (52–74)
HCT-CI, n (%)	Median 3 (range 0–7)	Median 2 (range 0–9)
0	2 (11.8%)	5 (20.8%)
1–2	5 (29.4%)	7 (29.2%)
≥3	10 (58.8%)	12 (50.0%)
Previous stem-cell transplantation, n		
Autologous	1	1
Allogeneic	1	1
Donor, n (%)		
MRD	6 (35.3%)	8 (33.3%)
URD 10/10	10 (58.8%)	15 (62.5%)
URD 9/10	1 (5.9%)	1 (4.2%)
HCT-failure before day +200, <i>n</i>		
Relapse	8	2
Relapse, <i>n</i>	10	6
Death, <i>n</i>	15	16
Death causes, <i>n</i>		
Progression/relapse	9	6
NRM non-GVHD related	1	5
NRM GVHD related	5	5
Follow-up, months, median (range)	6 (1–111)	10 (1–67)
Abbreviations: CMML = chronic myelomonocytic leukemia; GVHD = graft-versus-host disease; HCT-CI = hematopoietic cell transplantation comorbidity index; MDS = myelodysplastic syndrome; MDS-EB myelodysplastic syndrome with excess of blasts-1; MRD = HLA-matched related donor; NRM = non-relapse mortality; TBI = total body irradiation; URD = HLA-matched unrelated donor.		