

## THE TWO YEARS TRANSPLANT ACTIVITY OF A NEW BUILDED CENTER

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Hematopoetic stem cell transplantation (HSCT) is being using increasingly as a part of treatment of various diseases. Hematologic malignancies are the main indications whereas stem cells were used following high dose chemotherapy to rebuild hemopoiesis. We here present our first two years transplant experience. **Method:** The stem cell Unit (SCTU) has 15 single rooms with HEPA filters. Patients were mostly referred from Hematology clinics which SCTU does not have. All patients were reassessed before hospitalization according to the disease type, status and any co-morbid disease which is a contraindication for HSCT. Among autologous HSCT group antimicrobial prophylaxis was given only when the patients had invasive fungal infection and/or viral infection history. All allogeneic transplant patients did receive antimicrobial prophylaxis. GvHD prophylaxis consisted of CsA + short term MTX. Peripheral blood was used in all autologous SCT but in 10 among allogeneic SCT patients. Chimerism analysis was performed by DNA analysis. **Results:** A total 200 transplants (allogeneic: n=13, autologous n= 187) were performed. The median age of patients was 47 range 18 – 66years) with a ratio female to male; 75/125. The conditioning regimen did change according to the disease. BEAM was used for lymphoma, BU/CY for acute leukemia, high dose melphalan for multiple myeloma, high dose cyclophosphamide for aplastic anemia. The hospitalisation duration was median 34days. The median day to the engraftment was 13.6 days. The early mortality ratio was found to be 10%. **Conclusion:** HSCT is a part of a treatment which has to be performed without time consuming. The close relationship between transplant centers and Hematology clinics would be the way of discontinuously treatment of the patients.

Total (n)	200
Autologous /allogeneic HSCT	187/13
MM	106
NHL	35
HL	30
AML	5
ALL	2
CLL	1
AA	1
Germ cell tumor	2