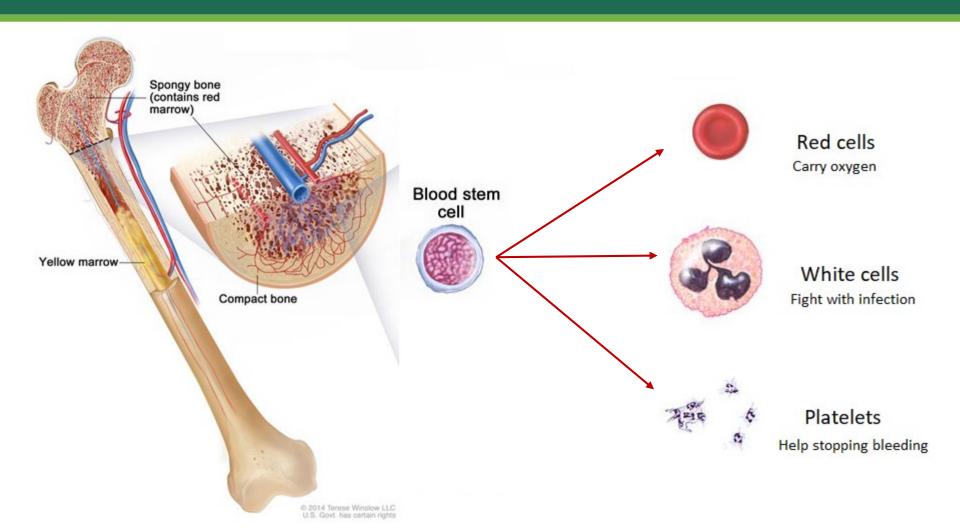
WHAT IS MDS?

Kimo Bachiashvili MD
Division of Hematology and Oncology
O'Neal Comprehensive Cancer Center at the UAB

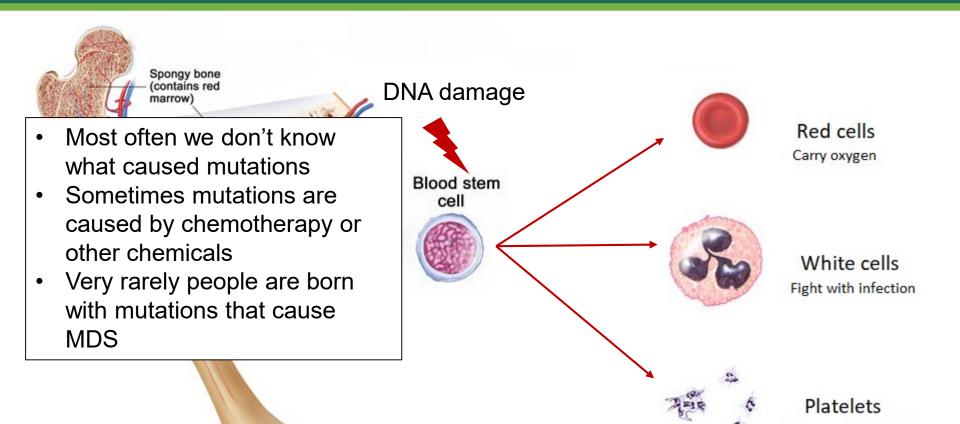


BLOOD AND ITS PRODUCTION





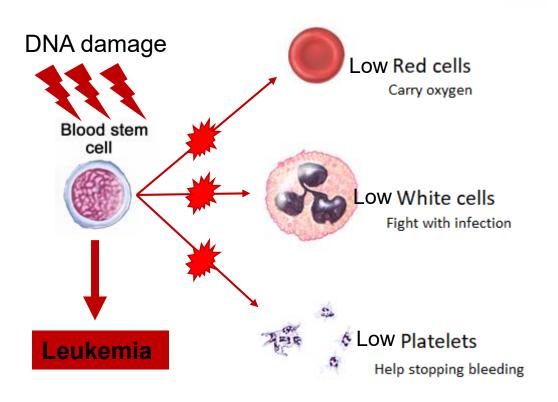
WHAT IS MDS?





© 2014 Terese Winslow LLC U.S. Govt. has certain rights Help stopping bleeding

LOW BLOOD COUNTS



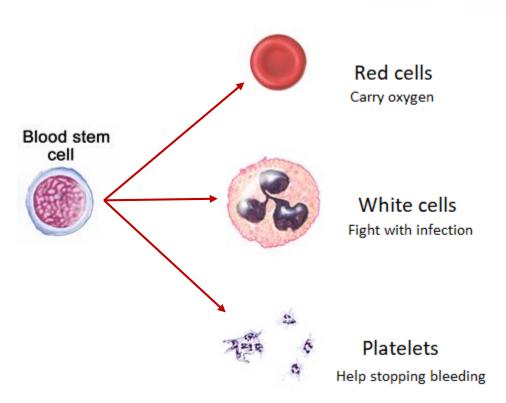
Anemia: Tiredness, dizziness, shortness of breath and chest pain

Neutropenia: predisposition to infections

Thrombocytopenia: predisposition to easy bruising and bleeding



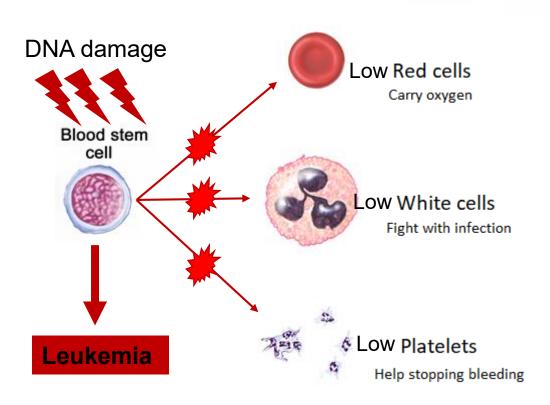
HOW WE DIAGNOSE MDS



- Low blood cell counts
 - 1. Rule out other causes of low counts
 - 2. Blood tests and Bone marrow biopsy to look for any of below:
 - Abnormal cells in the marrow
 - dysplastic cells
 - sideroblasts
 - leukemia cells(blasts) <20%
 - Genetic mutations
 - cytogenetics,
 - molecular mutations



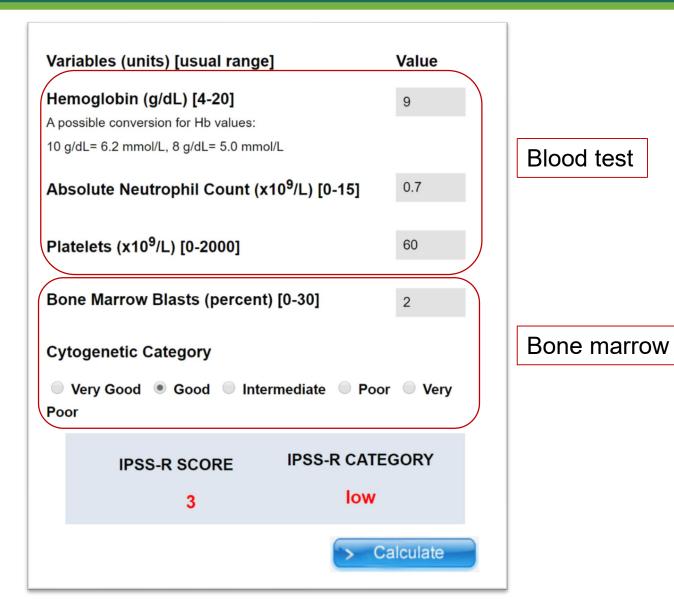
ESTIMATING RISKS



- What are the chances of early death due to MDS?
- What are the chances of MDS converting into leukemia?



ESTIMATING RISK: IPSSR



https://www.mds-foundation.org/ipss-r-calculator/

ESTIMATING RISK: IPSSR

Lower-risk MDS

Higher-risk MDS

Score	≤1.5 Very Low	>1.5-3 Low	>3-4.5 Intermediate	>4.5-6 High	>6 Very High
Overall Survival (mean)	8.8 years	5.3 years	3.0 years	1.6 years	0.8 years
Risk of AML in 25% of patients (median)	Not reached	10.8 years	3.2 years	1.4 years	0.73 years

- IPSS-R does not include patients who receive treatments that can extend survival
- IPSS-R risk is used to guide treatment

PRIORITIES

Priorities in low-risk MDS

1 Improvement of cytopenia(s)
Less transfusions
Less iron overload

2 Tolerability of a given treatment Quality of life

3 Delay disease progression Improve survival

4 Cure

Priorities in high-risk MDS

Delay disease progression Improve survival Cure

Reduction of disease burden Improvement of cytopenia(s) Less transfusions

Tolerability of a given treatment

4 Quality of life

THANK YOU