A patient with LR-MDS who progressed

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Patient EB, Paris (I)

07/2016:
- A 65 yo female, fatigue
- Macrocytic anemia
- **PMH:** Bariatrics; Peptic d.; Smoking
- **PE:** unremarkable; ECOG 0
- **CBC:**
  - Hb 10.1; MCV 109; WBC 5.5; ANC 2.0;
  - PLT 492k!
- **BM:** Er + Meg dysplasia; LR-MDS
- **Cytogenetics:** del(5q)
Patient EB, Paris (II)

- **Dg:** LR-MDS, del(5q) Syndrome
- **Hb declines** – 7.1
  - RBC transfusions
- Treatment:
  - AraNesp 150 micg/wk
    - Then – 300 micg/wk
    - Then - 500 micg/wk
- **Response**
  - RBC independent
Patient EB (III), Israel

11/2016: Aliya (Immigration) to Israel
  - Hb continue to rise 11.8
7/2017: Hb declines – RBC transfusions
7/2017: Lenalidomide (10mg qd) – Hb 13.3
7/2018: Loss of response; RBC dependent
  - BM: 3-L dysplasia, 7% blasts
  - Cytogenetics: del(5q) + 20q-
  - Treatment: Aza + Pevonedistat
11/2018: CR
Patient EB (IV)

- 11/2018: CR
- 01/2019: CR (RBC independent)
- 03/2019:
  - RBC dependent (again)
  - BM: Hypercellular, 3-lineage dysplasia,
  - 7% blasts; cytogenetics: del (5q)
- 06/2019: Rigosertib
- 08/2019: Decreased RBC requirements
  - BM: No blasts, but increased reticulin
Patient EB (V)

11/2019:
- RBC dependent (2u/m)
- CBC: Hb 8.1; MCV 83; WBC 6.7; ANC 4.6
- PLT 214k
- BM:
  - BM blasts 0-1%
  - Eosinophils 6%; Basophils 3%
  - BM fibrosis grade II-III: MF
- Cytogenetics:
  - Del (5q); +21 (trisomy)
Patient EB:

- Diagnosis ?
  - MDS/MPN ?
- Cause ?
  - Natural course ?
  - Drug related ?
- Treatment ?
  - SCT ?