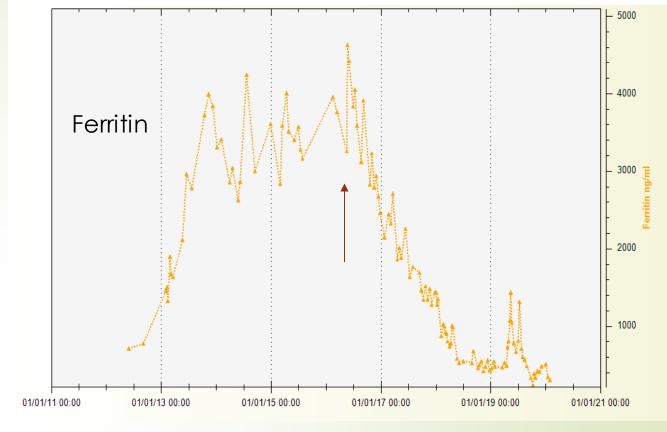
The Iron man: when tissue is the issue

- 64 y.o. man
- MDS-RS Dx 2012.
- Normal karyotype, no blasts. Intermediate IPSS-R.
- Highly and chronically transfusion dependent (~6 RBC units/month).
- Shortly responded to EMA and lenalidomide.
- Refuses a transplant.
- Develops Iron overload by 2014.

Chelation therapy

- Deferiprone trials-stopped d/t toxicity
- Deferasirox-no HMO coverage
- Desferal-since 5/2016



Cardiac T2 (MIC)	0.7 normal	0.8 normal	4.2 sev ere	3.3 sev ere	2.6 modera te
Liver	25	28	22	3.4	5.1
T2(LIC)	severe	severe	severe	mild	mild

Discussion

- How to interpret the discrepancy between the falling ferritin levels and steady T2 measurements?
- What would be considered realistic chelation goals for such patient?
- Is there enough data to support a more aggressive chelation schedule?