



POSTER PRESENTATIONS

ADULT HEMATOLOGY ABSTRACT CATEGORIES

ACUTE LEUKEMIAS

PP 01

ASPARAGINASE INDUCED SINUS VEIN THROMBOSIS IN AN ADULT YOUNG ALL PATIENT

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Objective: Asparaginase has a very important role in ALL treatment among increasing of remission rate and duration. Multiple side effects prevent its regulatory use. Asparaginase reduce antithrombin 3, heparin cofactor II, protein C and plasminogen synthesis. By the way, P-selectin, PAI 1, tissue factor activity, and vWF antigen levels increase. Hypofibrinogenemia may be a marker of hemostasis disturbances and decreased protein synthesis. **Case report:** A 25-year-old male patient with acute T-cell lymphoblastic leukemia diagnosis was initiated on induction chemotherapy according to augmented BFM protocol. After 4 weeks, remission was confirmed. During consolidation with the third dose of standard L-asparaginase of 10000 units, headache, nausea and vomiting started and confusion developed. Biochemical investigations, PT, aPTT were within normal limits. Fibrinogen was 92 mg/dL and D-dimer was high. Contrast-enhanced MRI showed a thrombus occluding. **Methodology:** the superior sagittal sinus. He was intubated and followed up in the intensive care unit due to a rapid decline in the Glasgow score and epileptic seizures. Correction of fibrinogen with cryoprecipitate anticoagulation treatment contributed to symptoms improvement. Unfortunately, asparaginase was removed from the protocol. During maintenance therapy, he has had severe COVID-19 pneumonia and during this time he did not experience any thrombosis related complications. **Results:** Asparaginase therapy is associated with low antithrombin and fibrinogen levels and 7% of thrombosis rate. Previous studies showed that, in ALL patients, thrombosis 2531-1379/

occurred far more frequently during cycles that contained asparaginase than those that did not. **Conclusion:** Therefore, studies have investigated the role of fresh frozen plasma or cryoprecipitate supplementation to reduce the thrombohemorrhagic risk of therapy. Retrospective studies suggest antithrombin concentrates may have a beneficial effect on the outcomes of adults treated with asparaginase for ALL.

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PP 02

VENETOCLAX AZACITIDINE COMBINATION THERAPY IN FIRST-LINE TREATMENT OF ACUTE MYELOID LEUKEMIA PATIENTS: A SINGLE CENTER EXPERIENCE

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Objective: The response of elderly patients with acute myeloid leukemia (AML) to standard induction therapy is quite poor due to higher frequency of adverse genomic features, increased resistance to treatments, comorbidities and performance status. BCL-2 overexpression is implicated in survival of AML cells and treatment resistance. Preclinical data demonstrated the anti-leukemic effect of venetoclax, a selective BCL-2 overexpression is implicated in survival of AML cells and treatment resistance. **Methodology:** Venetoclax has received FDA approval for the treatment of AML patients >75 years of age and in combination with hypomethylating agents/low-dose cytarabine in patients not eligible for intensive therapy. Six newly diagnosed AML patients who were followed up in Gülhane Education and Training Hospital, Hematology clinic and treated with azacitidine+venetoclax were evaluated retrospectively. **Results:** F/M:1/5, the mean age was 77.3 (63-87). Two patients were secondary AML. All