OP 10

THE PROGNOSTIC ROLE OF WHOLE BLOOD VISCOSITY AND BONE MARROW FIBROSIS IN PREDICTING SURVIVAL OUTCOMES IN NEW DIAGNOSIS MULTIPLE MYELOMA PATIENTS

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Objective: This study aimed to evaluate the prognostic role of whole blood viscosity and bone marrow fibrosis in predicting survival outcomes and relationships with prognostic predictors, such as international scorin system albumin levels, beta2-microglobulin, total protein, albumin and lactate dehydrogenase in newly diagnosed multıple myeloma patients. **Case report:** Methodology We retrospectively evaluated 108 patients diagnosed with multıple myeloma between 2015-2022. Whole blood viscosity was calculated using the Simone formula, incorporating the haematocrit and total protein values. Bone marrow fibrosis was graded as mild (2), significant (3), or advanced. Comparisons of grade 0-3 bone narrow fibrosis and high-low calculated whole blood viscosity groups in terms of overall survival were conducted using the Kaplan-Meier survival curve and log-rank test. **Results:** The median follow-up period was 16 months, and 57.4% of patients died during follow-up. The median overall survival was 26 months. The calculated whole blood viscosity (c-WBV) value predicted mortality with 88.7% sensitivity and 45.7% specificity. Patients with a high c-WBV ($\geq$17.14 208 mPa-s) had significantly lower

PFS

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one- and two-year survival rates than those with a low c-WBV (<17.14 208 mPa-s) (p<0.001). Bone narrow fibrosis was inversely related to survival, with higher grades being associated with lower survival rates. The two-year expected survival time respectively bone narrow fibrosis 2 and 3 was determined to be 56.7% and 43.6% 41.4% and 23.3% (p<0.001). This study highlights the potential of whole blood viscosity and bone narrow fibrosis as prognostic markers in patients with newly diagnosed multıple myeloma patients. **Conclusion:** Incorporating these parameters into the existing staging systems may enhance prognostic prediction and guide treatment decisions. Further prospective studies are warranted to validate these findings and explore the mechanistic links between whole blood viscosity, bone narrow fibrosis, and MM pathophysiology.

Adult Hematology Abstract Categories

Stem Cell Transplant
OP 11

SURVIVAL OUTCOMES OF AUTOLOGOUS STEM CELL TRANSPLANTATION IN LYMPHOMA PATIENTS

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Objective: Lymphomas, a diverse group of hematological malignancies, vary significantly in their prognosis, survival outcomes and response to treatment. High-dose chemotherapy followed by autologous stem cell transplantation (ASCT) has been frequently used to treat patients with relapsed or refractory lymphoma, offering a potential for long-term remission. However, survival outcomes after ASCT can differ substantially depending on the type of lymphoma. This study aims to compare survival outcomes across six different lymphoma subtypes—Hodgkin's lymphoma (HL), diffuse large B-cell lymphoma (DLBCL), follicular lymphoma (FL), marginal zone lymphoma (MZL), mantle cell lymphoma (MCL), and T-cell lymphoma—in patients who have undergone autologous stem cell transplantation. While most reported data in the literature focus on a single lymphoma subtype, this study examined multiple subtypes within a single center, allowing for a direct comparison of survival outcomes. This study also aimed to compare these outcomes with survival and relapse rates reported in the literature, identifying potential areas for further investigation into the underlying causes of observed differences. **Methodology:** This retrospective study took place at Bezmialem Vakif University Hospital, İstanbul, Turkey. Medical records were reviewed of 81 patients from six