

Late morbidity, mortality down for survivors of childhood ALL

August 21 2020



(HealthDay)—Contemporary survivors of childhood acute lymphoblastic

leukemia (ALL) have reduced late morbidity and mortality, according to a study published online July 24 in the *Journal of Clinical Oncology*.

Stephanie B. Dixon, M.D., M.P.H., from St. Jude Children's Research Hospital in Memphis, Tennessee, and colleagues examined all-cause and health-related late mortality, subsequent malignant neoplasms (SMNs), [chronic health conditions](#), and neurocognitive outcomes among 6,148 survivors of childhood ALL diagnosed between 1970 and 1999. Six groups of therapy combinations and treatment intensity were defined: 1970s-like (70s), standard- or high-risk 1980s-like and 1990s-like (90sSR, 90sHR), and relapse/transplantation.

The researchers found that the 20-year all-cause late mortality was 6.6 percent overall. Lower health-related late mortality was seen for 90sSR and 90sHR compared with 70s (rate ratio: 0.2 and 0.3), comparable with the U.S. population. 90sSR had a lower rate of SMN compared with 70s (rate ratio, 0.3), which was similar to that of the U.S. population. The 90sSR group also had fewer severe chronic health conditions (20-year cumulative incidence, 11 versus 22.5 percent) and a lower prevalence of impaired memory and task efficiency (prevalence ratios, 0.7 and 0.5) compared with the 70s.

"Taken together, these results demonstrate that the goal of risk-stratified therapy for children with standard-risk ALL, to reduce late morbidity and [mortality](#) while maintaining excellent outcomes, has been realized," the authors write.

Several authors disclosed ties to the pharmaceutical and medical device industries.

More information: [Abstract/Full Text \(subscription or payment may be required\)](#)

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Citation: Late morbidity, mortality down for survivors of childhood ALL (2020, August 21)
retrieved 4 May 2023 from

<https://medicalxpress.com/news/2020-08-late-morbidity-mortality-survivors-childhood.html>

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