

Social factors affect treatment for mantle cell lymphoma

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association between AHCT and lower all-cause mortality (hazard ratio, 0.58). Mortality related to transplant was 2 percent. Mortality was increased among MCL <u>patients</u> not receiving an AHCT.

"Improvements in supportive functions potentially increasing the likelihood of tolerating an AHCT and introduction of more tolerable treatments for these groups are needed," the authors write.

Several authors disclosed financial ties to the pharmaceutical industry.

More information: Abstract/Full Text

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(HealthDay)—Autologous hematopoietic cell transplantation (AHCT) is associated with a lower likelihood of death among adult mantle cell lymphoma (MCL) patients, but certain sociodemographic factors may affect the selection of candidates for this type of treatment, according to a study published online March 12 in *Blood Advances*.

Ingrid Glimelius, M.D., from Uppsala University in Sweden, and colleagues used the Swedish Lymphoma Register to identify 369 MCL patients (aged 18 to 65 years) diagnosed from 2000 to 2014. The likelihood of AHCT within 18 months of diagnosis was assessed.

The researchers found that 40 percent of patients were not treated with AHCT within 18 months. Never-married and divorced patients had a lower likelihood of undergoing AHCT compared with married patients. Patients with a lower educational level and patients with any comorbidity also had a lower likelihood of receiving AHCT. There was an



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