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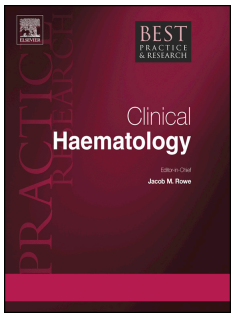

AML in 2017: Advances in clinical practice

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AML in 2017: Advances in clinical practice

Jacob M. Rowe, MD

Technion, Israel Institute of Technology, Haifa, Israel
Department of Hematology, Rambam Health Care Campus, Haifa, Israel
Northwestern University Feinberg School of Medicine, Chicago, IL, USA
Department of Hematology, Shaare Zedek Medical Center, Jerusalem, Israel

Shaare Zedek Medical Center, 12 Shmuel Bait Street, Jerusalem, Israel

Abstract

Numerous advances have been made in the biology and treatment of acute myeloid leukemia (AML) in 2017. These include the integration of the assessment of minimal residual disease (MRD) into clinical practice, the approval and near approval of new agents, improvement in therapy for older patients, and the development of a number of promising new agents, including IDH inhibitors, a Hedgehog signaling pathway inhibitor, and a histone deacetylase inhibitor. In addition, the concept of chemotherapy manipulation is still valid and can increase efficacy in some AML populations, and transplant patterns have shifted, enabling more patients to receive a hematopoietic stem cell transplant. These and other advances are critical to improve the outcome for patients with AML.

Keywords: Acute myeloid leukemia; AML; Hedgehog; histone deacetylase; IDH; minimal residual disease; MRD; transplant

Email: rowe@rambam.health.gov.il

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