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Epstein-Barr virus related post-transplant lymphoproliferative disorders after allogeneic hematopoietic stem cell transplantation

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Highlights

- EBV-PTLDs are rare but potentially fatal complications of allo-HSCT, characterized by uncontrolled proliferation of EBV-infected lymphocytes.
- The most frequent risk factors include T cell depletion of graft (including ATG use), HLA mismatch, severe GVHD, EBV sero-mismatch (recipient-/donor+) and so on.
- EBV-PTLDs commonly manifest as fever and lymphadenopathy and may rapidly progress to multi-organ failure and even death.
- Histopathological evidences are indispensable for the diagnosis while EBV-DNAemia and imaging abnormalities are also very helpful.
- The management of EBV-PTLDs includes prophylaxis, pre-emptive treatment and targeted therapy. Approaches such as RI, administration of rituximab, DLI, EBV-CTLs and chemotherapy are the common treatment choices, and rituximab based regimen is the mainstay.

Abstract: Epstein-Barr virus related post-transplant lymphoproliferative disorders (EBV-PTLDs) are rare but potentially fatal complications of allogeneic hematopoietic stem cell transplantation (allo-HSCT), characterized by uncontrolled proliferation of EBV-infected lymphocytes. The most frequent risk factors include T cell depletion of graft, HLA mismatch, severe graft versus host disease (GVHD), EBV sero-mismatch (recipient-/donor+) and so on.

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