



Trajkova S., Cevreska L., Pivkova-Veljanovska A., Ivanovski M., Popova-Labacevska M., Ridova N. Stojanovska S., Cvetanovski M., Ristovska T., Stankovik S., Krstevska Balkanov S., Panovska-Stavridis I.

University Clinic for hematology, Skopje, North Macedonia

**Introduction:** The management of patients with chronic lymphocytic leukemia (CLL) is currently experiencing a revolution, as a result of new therapies and a host of biological and genetic variables that provide prognostic guidance in classical clinical staging systems. To predict the time to first treatment (TFT) we integrated the data of traditional staging system, cytogenetic aberrations, and mutational status in Chronic lymphocytic leukemia– International Prognostic Index (CLL-IPI)(1).

**Aim of the study:** To validate the prognostic value of chronic lymphocytic leukemia-international prognostic index (CLL-IPI) for Macedonian CLL patients.

**Material and Methods:** The study is set up retrospectively and includes 150 patients with CLL diagnosed and treated at the University Clinic of Hematology for a period of time from January 2011 to January 2020. The median follow-up was 48 months.

**Results:** The statistical data of the 150 patients shows that 85(56.6%) were males and 65 (43.3%) were females, with a median age of 64.3 (40-86) years old. The median TFS for low CLL-IPI (n=36(24%)), intermediate CLL-IPI (n=56(37.4%)), high risk CLL-IPI (n=38(25.3%)) and very high risk group (n=20(13.3%))(figure 1) according to the CLL-IPI scoring system was 10.8, 10.4, 10.0 and 7.6 months, respectively (figure 2). The median OS for low risk group was 78.6 for intermediate, high, and very high risk group was 58.8, 52.8 and 40 months, respectively (figure 3). The estimated 5-year OS rate was 97.8%, 93%, 42% and 30%, respectively for low risk group intermediate, high, and very high risk group. Multivariate analysis indicated that del 17p (P< 0.008) was independent prognostic factors of TFS (figure 3).

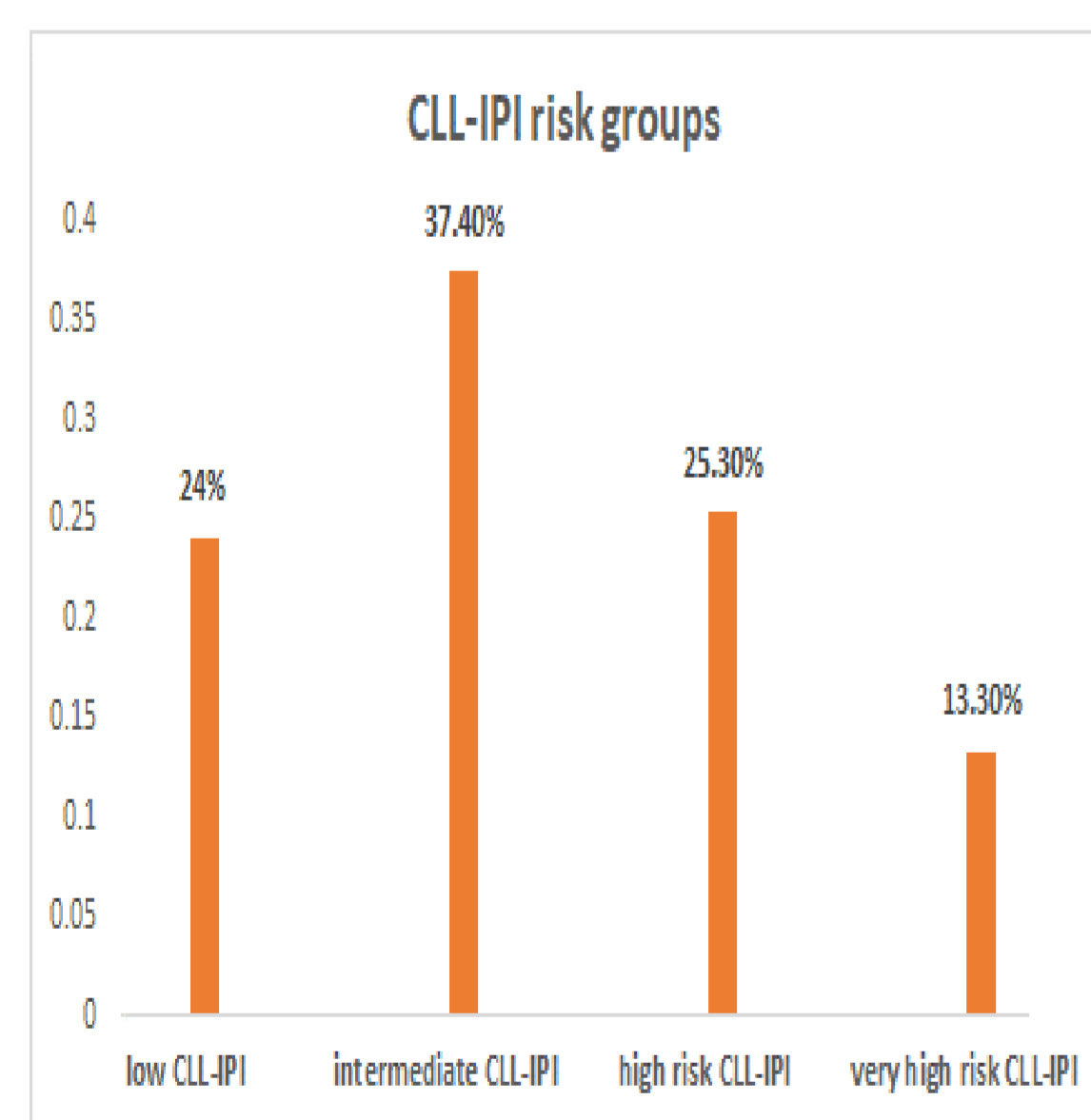


Figure 1. Distribution of pts according CLL-IPI risk groups

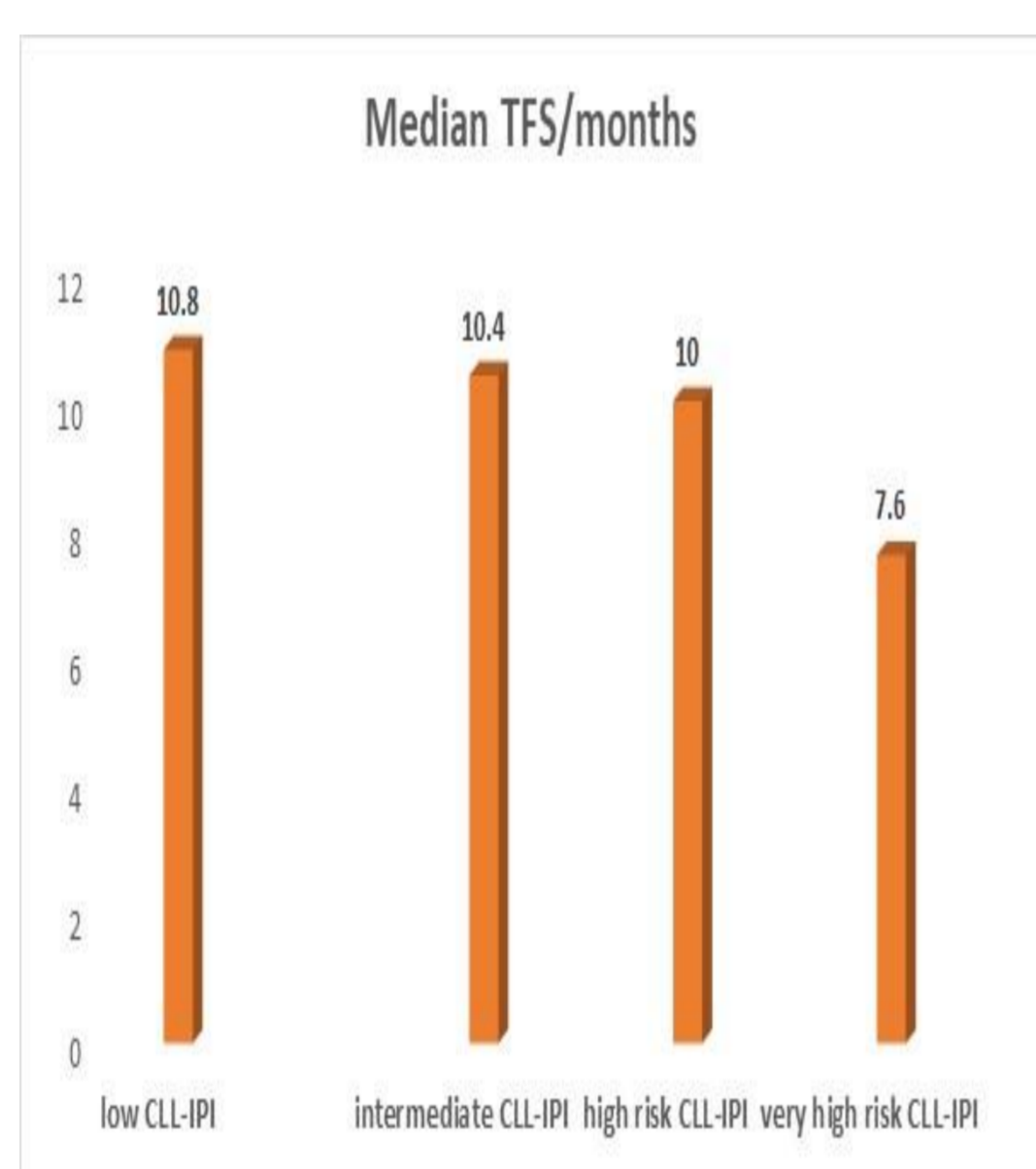


Figure 2. Median TFS

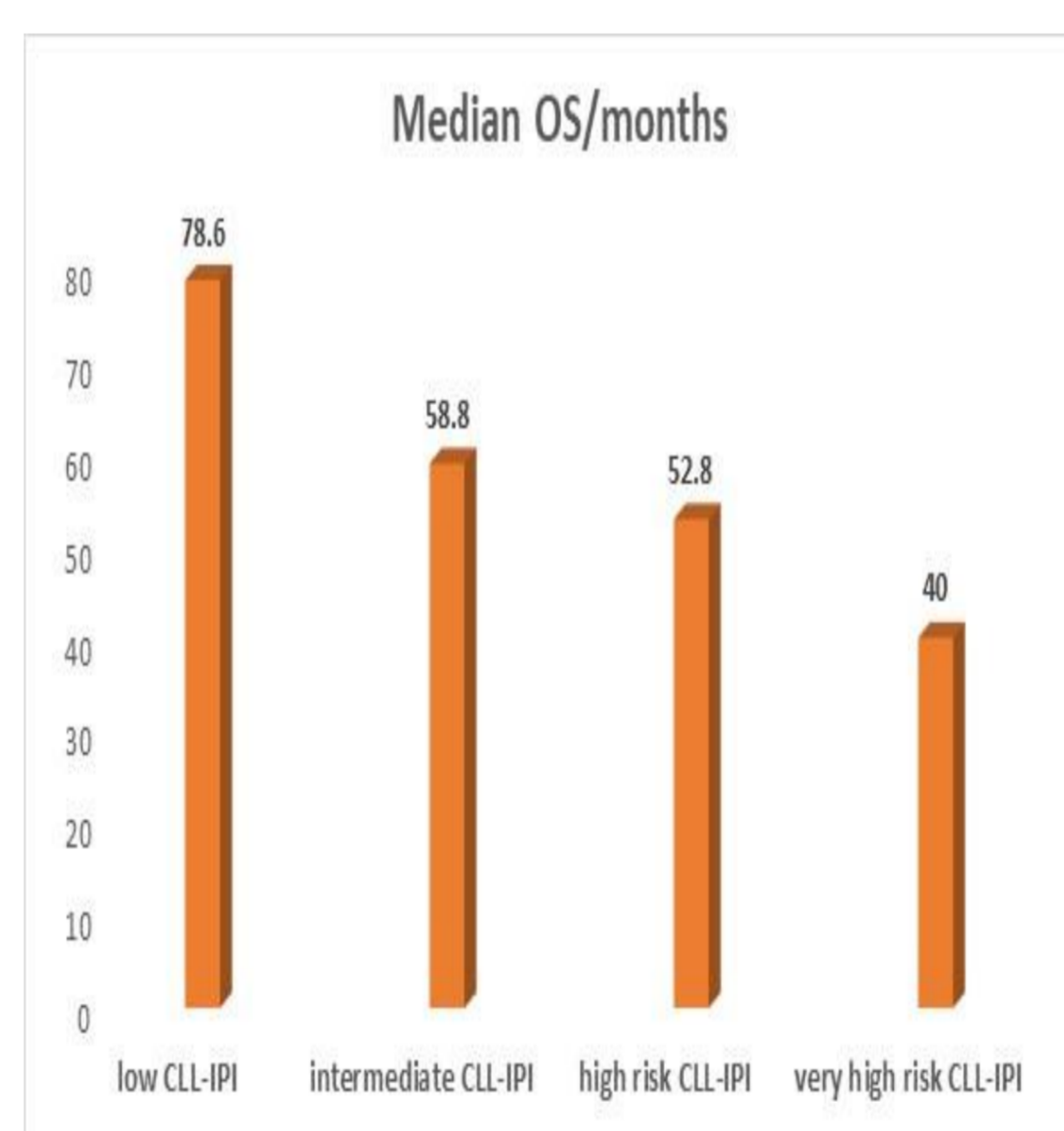


Figure 3. Median OS

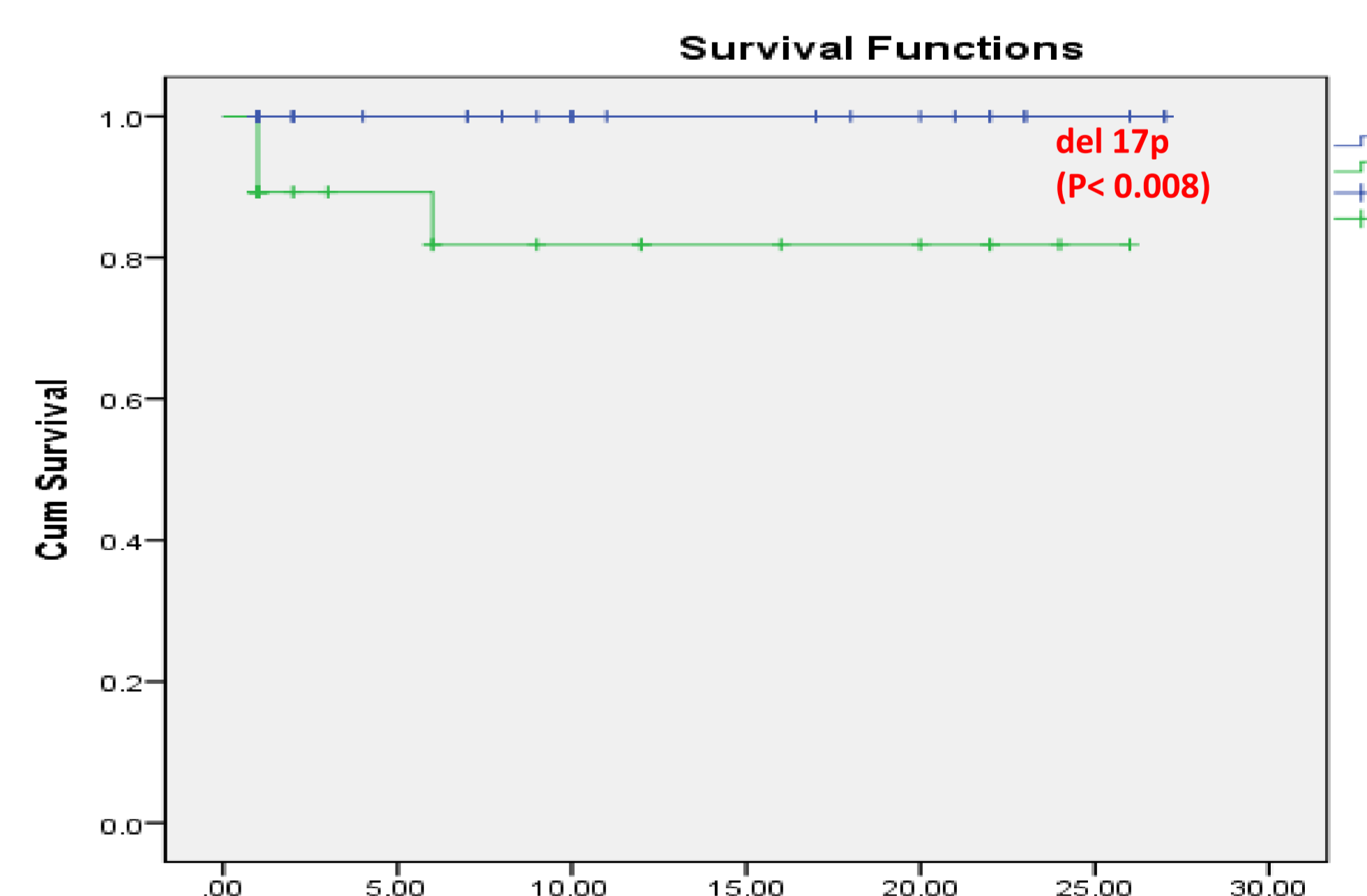


Figure 4. Independent prognostic factors of TFS

**Conclusions:** CLL-IPI is the influential tool for risk stratification in Macedonian CLL patients and this system also provided treatment recommendations for the different patient risk subgroup.

### Bibliography

- Jacob D. Soumerai, Ai Ni, Guan Xing, Julie Huang, Richard R. Furman, Jeffrey Jones, Jeffrey P. Sharman, Michael Hallek, Adeboye H. Adewoye, Ronald Dubowy, Lyndah Dreiling & Andrew D. Zelenetz (2019) Evaluation of the CLL-IPI in relapsed and refractory chronic lymphocytic leukemia in idelalisib phase-3 trials, *Leukemia & Lymphoma*, 60:6, 1438-1446, DOI: [10.1080/10428194.2018.1540782](https://doi.org/10.1080/10428194.2018.1540782)



# IACH

Four horizontal grey bars, likely representing a redacted area or a placeholder for content.