

ONCODAILY MEDICAL JOURNAL

abstract

Excellent Long-Term Survival of Down Syndrome with Myeloid Leukaemia at a Single Tertiary Centre in Malaysia

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DOI: 10.69690/ODMJ-018-0425-898



SIOF Asia, 2025, Saudi Arabia

abstract



Excellent Long-Term Survival of Down Syndrome with Myeloid Leukaemia at a Single Tertiary Centre in Malaysia

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DOI: [10.69690/ODMJ-018-0425-898](https://doi.org/10.69690/ODMJ-018-0425-898)

Introduction: Children with Down Syndrome are predisposed to developing erythromegakaryoblastic leukaemia, better known as Myeloid Leukaemia of Down Syndrome (ML-DS). Previously used reduced-intensity regimens were associated with poor outcomes due to disease resistance or recurrence.

Methodology: We retrospectively reviewed all children with ML-DS treated at Hospital Kuala Lumpur / Hospital Tunku Azizah (HTAKL) between January 2014 and December 2023.

Results: Thirty-six patients were identified. The median age at diagnosis was 18 months old. Twelve patients (33%) had Transient Abnormal Myelopoiesis (TAM). None had central nervous system involvement. At diagnosis, the median platelet count was 34,000/uL. Only 15 patients (41.7%) had > 20% blasts in their bone marrow. Two

patients who refused treatment died of the disease. One patient with uncontrolled disseminated *Staphylococcus aureus* infection died before treatment could be given. One patient with severe pneumonia died within 24 hours of Cytarabine infusion.

One patient died of severe Influenza A pneumonitis after completion of his first course of chemotherapy. All 31 patients who completed chemotherapy based on the ML-DS 2007 protocol achieved remission after the first course. There were no relapses. The 5-year overall survival was 86.1%. Three patients required paediatric intensive care unit (PICU) admission for ventilatory support, but none required inotropic support. None died of bacterial infection.

Conclusion: Excellent long-term survival can be achieved in children with ML-DS treated with the ML-DS 2007 protocol.