

Secondary Cancers Occur Decades After Ped ALL

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The incidence of secondary neoplasms continues to rise steadily for at least 30 years after successful treatment of childhood acute lymphoblastic leukemia, a retrospective study showed.

Most of the late-developing secondary neoplasms are low-grade tumors such as meningioma and basal cell carcinoma, but the risk for high-grade tumors, especially

carcinomas, still significantly exceeds the risk in the general population.

These findings highlight the need for continued careful follow-up of adult survivors of childhood acute lymphoblastic leukemia (ALL), Dr. Nobuko Hijiya of St. Jude Children's Research Hospital, Memphis, and her associates reported.

Previous research data has shown a low (1%-3%) incidence of secondary neoplasms for the first 10-15 years after childhood ALL. Data on the longer-term inci-

dence "has been limited by relatively incomplete and short follow-up times."

Dr. Hijiya and her associates reviewed the records of all 2,169 children who had achieved complete remission after treatment, in clinical trials at St. Jude between 1962 and 1998. The median follow-up was 19 years (range, 2-41 years) postdiagnosis, and the median subject age at last follow-up was 25 years (range, 6-53 years).

A total of 168 subjects (nearly 8%) developed a secondary neoplasm—45 of

them after experiencing a relapse of ALL. Acute myeloid leukemia was most common in those who remained in remission, whereas basal cell carcinoma was most common in those whose ALL had relapsed.

In this patient population, risk of developing a high-grade tumor was more than twice as high as that in the general population. (JAMA 2007;297:1207-15). Incidence of secondary neoplasms was 4% at 15 years after remission was achieved, 5% at 20 years, and 11% at 30 years. ■

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