

EA9131 Clinical Trial Results Summary

Simplified Patient Care Strategy in Decreasing Early Death in Patients with Acute Promyelocytic Leukemia (APL)

What did this trial involve and who was it for?

This study sought to determine whether a simplified treatment plan, along with management recommendations and 24/7 support from a dedicated group of experts, would lead to a decrease in early deaths from APL. APL is a very rare subtype of acute myeloid leukemia; only 3,000 patients are diagnosed each year in the United States. Because this type of cancer is so rare, many providers are not familiar with how to treat this disease and often lack access to standardized care instructions that reflect the most effective treatments.

APL is highly curable with treatment, but the potential side effects are not typical of standard chemotherapy. During the first month of treatment, patients with APL are at the highest risk of death, with a mortality rate of up to 30%. This usually results from a serious side effect called *differentiation syndrome*, caused by a large, rapid release of cytokines (immune substances) from leukemia cells that are affected by the anticancer drugs. After the first month of treatment, survival rates for patients with APL are much higher.

EA9131 created a collaborative care model to connect each patient's treatment team with an academic disease expert who suggested ways to adjust or personalize standard treatment based on the patient's disease status and risk factors. A total of 202 patients participated in EA9131.

What are the results?

- EA9131 found that the simplified collaborative care model reduced early deaths from an estimated 30% to 3.5%. This far exceeded its primary objective of reducing early deaths to 15%.
- Since the disease experts could provide support remotely from large academic medical centers, the study also provided a framework to enhance care for patients receiving treatment at small community cancer centers.

What do the results mean for patients?

- EA9131 provided insight into personalized treatment plans for patients with APL that may allow them to reach remission without additional side effects or an increased chance of early death.
- The study team is evaluating other ways to provide guidance and care recommendations for patients receiving treatment for complicated cancer diagnoses in community settings.

For more information, go to:

- United States National Institutes of Health (NIH) Library of Medicine: <https://clinicaltrials.gov/study/NCT03253848>
- ECOG-ACRIN Website: <https://tinyurl.com/EA9131results>
- Published in *Blood*: <https://doi.org/10.1182/blood-2022-163436>

About ECOG-ACRIN

This trial was led by the ECOG-ACRIN Cancer Research Group (ECOG-ACRIN). ECOG-ACRIN is a membership-based scientific organization that designs and conducts cancer research involving adults who have or are at risk of developing cancer. ECOG-ACRIN is a component of the National Cancer Institute's National Clinical Trials Network. Learn more at www.ecog-acrin.org.

To all the patients that participated in this trial, thank you. Without the involvement of patients like you, this research would not have been conducted.