

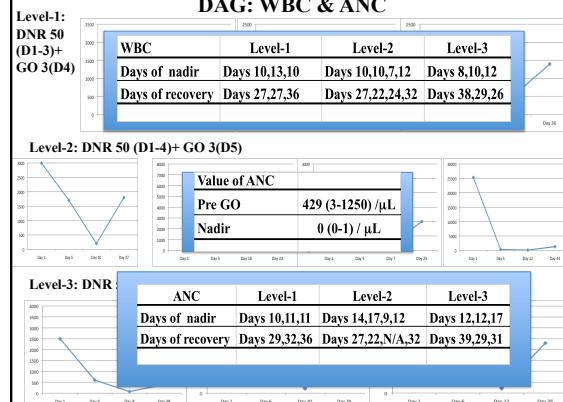
### IAG: Non-Hematologic Toxicity

	Level-1 (N=3)	Level-2 (N=3)	Level-3 (N=3)
Febrile Neutropenia			
Grade 3	3	2	2
Grade 4			1
Infection (Grade 4)			
Sepsis		1	
Cerebral Abscess		1	
Hepatic			
Grade 2	1	1	1
Grade 3			2
Anorexia, Nause/Vomiting			
Grade 2			2
Edema			
Grade 1			2
Skin rash			
Grade 2			1
Diarrhea			
Grade 1			1
VOD/SOS	0	0	0

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DLT !

### DAG: WBC & ANC



### DAG: Hematologic Toxicity

Hb	Level-1	Level-2	Level-3
Grade 0	0	2	0
Grade 1	3	1	1
Grade 2	0	1	2
Grade 3/4	0	0	0
Units of RBC-TF	18,0,6	0,6,10,10	6,6,8
Hb	Level-1	Level-2	Level-3
Days of nadir	Days 11,13,39	Days 13,6	Days 22,14,21
Days of recovery	Days 20,15,36	Days 22,44	Days 28,25,26
Platelet	Level-1	Level-2	Level-3
Grade 3	2	4	3
Grade 4	1	0	0
Units of PLT-TF	150,60,90	50,70,110,170	170,60,40
PLT	Level-1	Level-2	Level-3
Days of nadir	Days 11,13,20	Days 13,10,11,12	Days 25,12,17
Days of recovery	Days 25,32,34	Days 36,24,N/A,46	Days 38,34,26

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### DAG: Non-Hematologic Toxicity

	Level-1 (N=3)	Level-2 (N=4)	Level-3 (N=3)
Febrile Neutropenia			
Grade 3	1	3	2
Grade 4		2	
Hepatic			
Grade 2	1	1	2
Grade 3			
Anorexia, Nause/Vomiting			
Grade 2		1	1
Colitis			
Grade 2		1	
Diarrhea			
Grade 2			1
Cardiac			
Grade 2			1
Bleeding			
CNS		1*	
Laboratory			
Hypophosphatemia		1	
VOD/SOS	0	0	0

\* Due to Disease Progression

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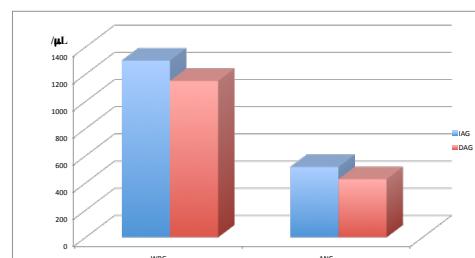
### Assessment of DLT

No of Pts	No of DLT
<b>IAG</b>	
Level-1	3 0
Level-2	3 0
Level-3	3 3
Prolongation of neutropenia Prolongation of thrombocytopenia Grade 4 Infection (Brain Abscess)	
<b>DAG</b>	
Level-1	3 0
Level-2	4 0
Level-3	3 0
Level-4	SRB recommended not to proceed

IAG-Level-3 is MTD  
DAG-Level-4 will be MTDRecommend Dose & Schedule: IAG-Level-2  
DAG-Level-3

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### Median Counts of WBC & ANC at Administration of GO



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Response					
IAG			DAG		
	Level-1 (N=3)	Level-2 (N=3)	Level-3 (N=3)	Level-1 (N=3)	Level-2 (N=4)
CR	1	2	1	ORR (CR+CRp)	10/19 (53%)
CRp				REL	8/14 (57%)
PR				REF	2/5 (40%)
NR (Blast Clearance)	1			Karyo	
Resistant Disease	1	1		CN	4/10 (40%)
				CBF	1/2 (50%)
				Comp/Others	3/5 (60%)
<b>Outcome:</b> Alive: 18 patients Dead: 1 patient (DAG-level-2) died of CNS bleeding due to PD					

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Conclusion					
<ol style="list-style-type: none"> <li>Combination of GO with conventional (as JALSG) IDR+Ara-C or DNR-Ara-C is well tolerated and active in relapsed/refractory AML</li> <li>MTD of GO in the combination is considered 5 mg/m<sup>2</sup> (just after IDR or DNR administration)</li> <li>Major toxicities are severe neutropenia, thrombocytopenia, febrile neutropenia</li> <li>No VOD/SOS was observed</li> <li>Both of IAG [ IDR 12 mg/m<sup>2</sup> (D1-3)+Ara-C 100 mg/m<sup>2</sup> (D1-7)+GO 3 mg/m<sup>2</sup> (D4)] and DAG [DNR (50 mg/m<sup>2</sup> D1-5)+Ara-C 100 mg/m<sup>2</sup> (D1-7)+GO 3 mg/m<sup>2</sup> (D6)] therapies are recommended for phase II study to evaluate long term efficacy and safety</li> </ol>					

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• Safety Review Board	Toshihiko Ohshima, M.D. Kiyohiko Hatake, M.D.	Hamamatsu University K.Shigeno, M.D. L.Hirano, M.D. and other doctors & nurses	All Doctors in JALSG	Chiba University doctors & nurses	Yokohama City University S.Tachibana, M.D. N.Tomita, M.D. and other doctors & nurses
All the Patients & their families participated in this study					

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