CHANGES OF QUALITY OF LIFE AFTER CESSION OF IMATINIB IN CHRONIC PHASE CHRONIC MYELOID LEUKEMIA PATIENTS WITH UNDETECTABLE MOLECULAR RESIDUAL DISEASE

S. Oh1, S Lee2, S Kim3, H Kim4, Y Mun5, D Kim6

1Internal Medicine, Kangbuk Samsung Hospital, South Korea, 2Hematology, Seoul St. Mary's Hospital, The Catholic University of Korea, South Korea, 3Internal Medicine, Dong-A University College of Medicine, South Korea, 4Internal Medicine, Ulsan University Hospital, South Korea, 5Internal Medicine, Ewha Womans University Hospital, South Korea, 6Hematology, Seoul St. Mary's Hospital, The Catholic University of Korea, South Korea

Background: As the number of studies of imatinib discontinuation have been increasingly conducted, the information on post-discontinuation quality of life (QOL) is becoming of considerable important for patients and health-related personnel. Aims: The purpose of this study was to investigate whether chronic myeloid leukemia (CML) patients who maintained undetectable molecular residual disease (UMRD) with long-term imatinib therapy show different health-related profiles after cessation of imatinib. Methods: Forty five patients who maintained UMRD after imatinib cessation were given questionnaire for 2 times (before discontinuation and at 6 month post-discontinuation). The health surveys were modified SF-36 + FACT.leu composed of imatinib-related adverse events (22 parameters), physical (parameters) and mental (10 parameters) health parameters. Results: Among 22 parameters of imatinib-related adverse events, 17 parameters significantly improved or disappeared after imatinib cessation except for weight change, skin color change to red, pruritus, skin rash, and sore throat. Three of 11 parameters of physical health (limited social activity, vulnerable to illness, and suffer from drug adverse events) and only 1 of 10 parameters of mental health (loss hope in the fight against the illness) significantly improved. Some parameters of physical health (enjoy life, well-being sense, healthy as anyone as I know, sleep well, and do for fun) and other parameters of mental health (accept the illness, satisfy to treatment, and satisfaction with family communication) worsen after cessation, but not significantly. Younger patients, female patients, and patients with low Sokal score showed a tendency of remarkable improvements in physical and mental health parameters. Interestingly some patients (approximately 25%) have experienced the aggravation of joint pain and myalgia in early period of imatinib cessation, but not related CPK elevation. Summary: Regardless of significant improvement of drug related adverse events, physical and mental health related parameters were not significantly improved. In addition, older, male gender, and high Sokal risk patients should be carefully monitored after treatment discontinuation.