Certain medicines used for bone marrow transplant (BMT) offer better cure for severe aplastic anemia (SAA)

Severe aplastic anemia (SAA) is a rare disorder in which the body doesn’t make enough blood cells. SAA can make people tired and at risk of severe infections and bleeding.

Although doctors have known that bone marrow transplant (BMT) can cure SAA, they didn’t know the best medicines to prepare patients for it. Researchers at 142 transplant centers around the world looked at medical records of about 1,400 people with SAA. All got a bone marrow transplant during 2000-2014.

Researchers wanted to know which medicines help the most. Before BMT, people get chemotherapy (chemo) and other medicines to prepare. This is called a conditioning regimen. There are many possible combinations of medicines.

For people who got BMT from a matched brother or sister, the best medicines were cyclophosphamide together with anti-thymocyte globulin (ATG), given with or without fludarabine. After 5 years, more than 90% (9 out of 10 people) who got these medicines were alive.

For people whose donor was not related to them (unrelated donor), there are 4 regimens commonly used, and one was not better than the other.

People who got BMT before the age of 30 were more likely to be alive than those who got BMT after age 30. That said, there are many factors in addition to age to be considered before recommending a transplant. Your physician is the best person to have that discussion with.

Ask your doctor

BMT can have severe side effects, so ask your doctor about the best treatment for you.

- Would BMT be helpful for me?
- How might I prepare for BMT?