Impact of Donor Age on HSCT Outcomes

Cord Blood Connect, Sept. 2020

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Background

- New graft options for HSCT are evolving
- Donor selection algorithms need to re-align with current clinical data
- Younger donor age has been reported to be associated with improved outcomes following transplantation
- Both unrelated donor transplants (MUD and MMUD) and haploidentical related donor transplants demonstrate higher overall survival with younger donors
- We explored the impact of donor age in a contemporary cohort of adults undergoing HSCT

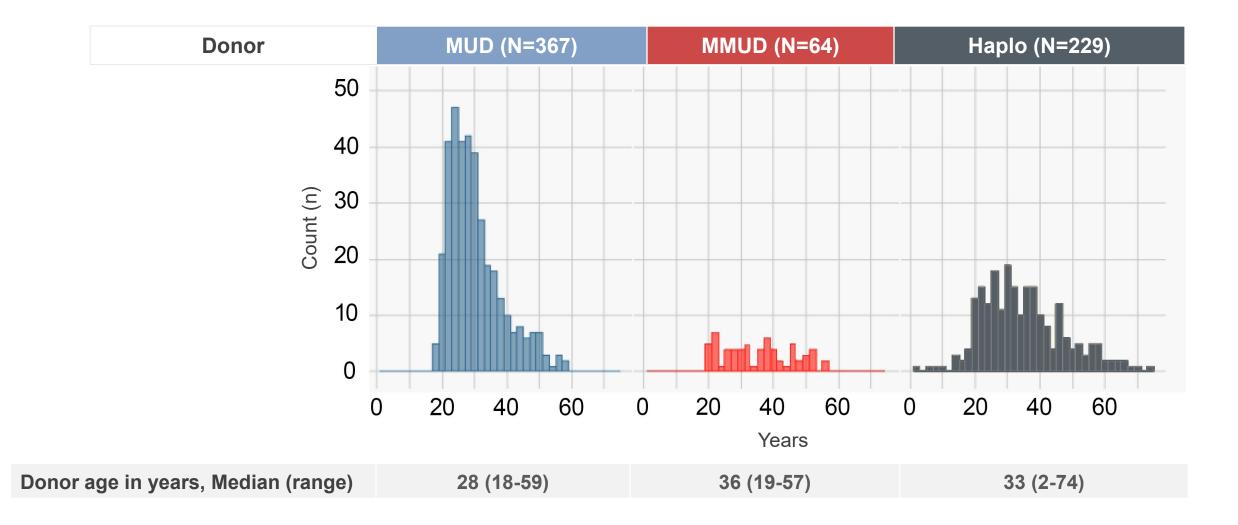
Study Design

Data was collected from the Center for International Blood and Marrow Transplant Research (CIBMTR) according to the following selection criteria:

- Patients:
 - Age 1 month–65 years
 - Myeloablative conditioning
 - Allogeneic HSCT for hematologic malignancy
 - Transplanted between
 Jan 2017 and Dec 2018
 - Median follow-up was 12 months

- Donors:
 - Haploidentical related, with posttransplant cyclophosphamide (Haplo);
 - 8/8 HLA-matched unrelated (MUD); or
 - 7/8-matched unrelated (MMUD) donor

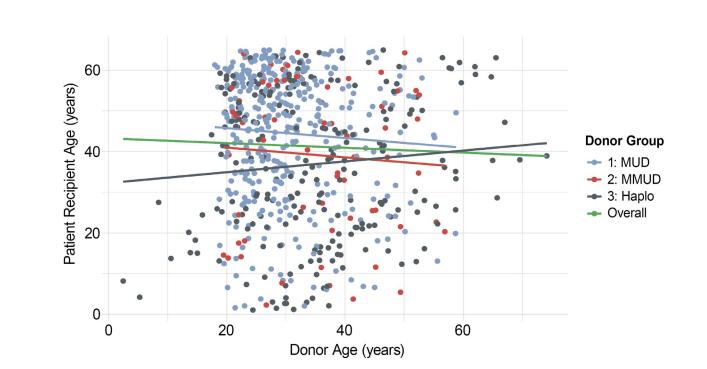
Distribution of Donor Age



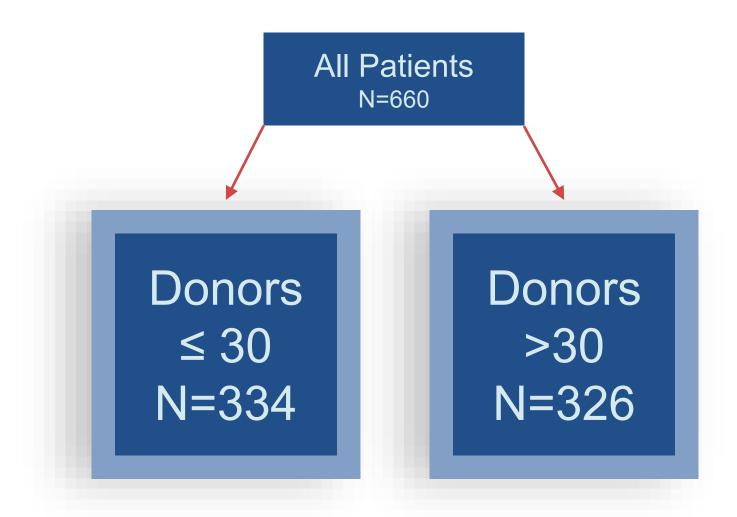
Donor Age Did Not Correlate with Patient Age

Patient age in years, Median (range)

- MUD: 49 (2-65)
- MMUD: 45 (2-64)
- Haplo: 38 (1-65)



Patient Groups



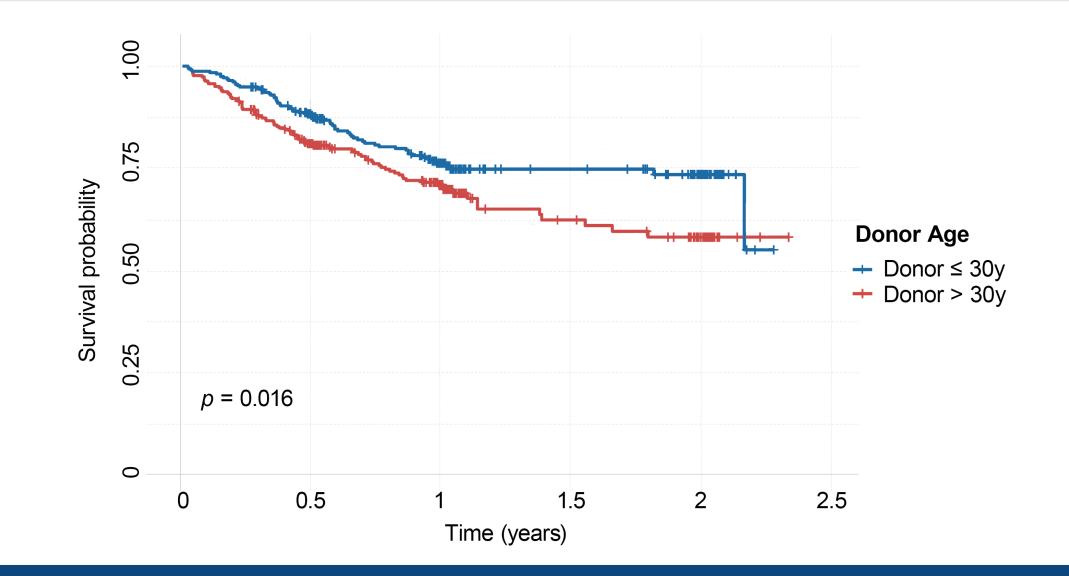
Baseline Characteristics: Patients

PARAMETER	Value	Donor ≤ 30y (n=334)	Donor > 30y (n=326)
Sex	Male	192 (57%)	181 (56%)
	Female	142 (43%)	145 (44%)
Age	median (range)	47 (1 - 65)	44 (1 - 65)
Disease	AML	134 (40%)	120 (37%)
	ALL	100 (30%)	87 (27%)
	MDS	73 (21%)	66 (20%)
	Other	27 (8%)	53 (16%)
Karnofsky / Lansky performance score	≥ 90	202 (60%)	202 (62%)
	<90	132 (40%)	124 (38%)

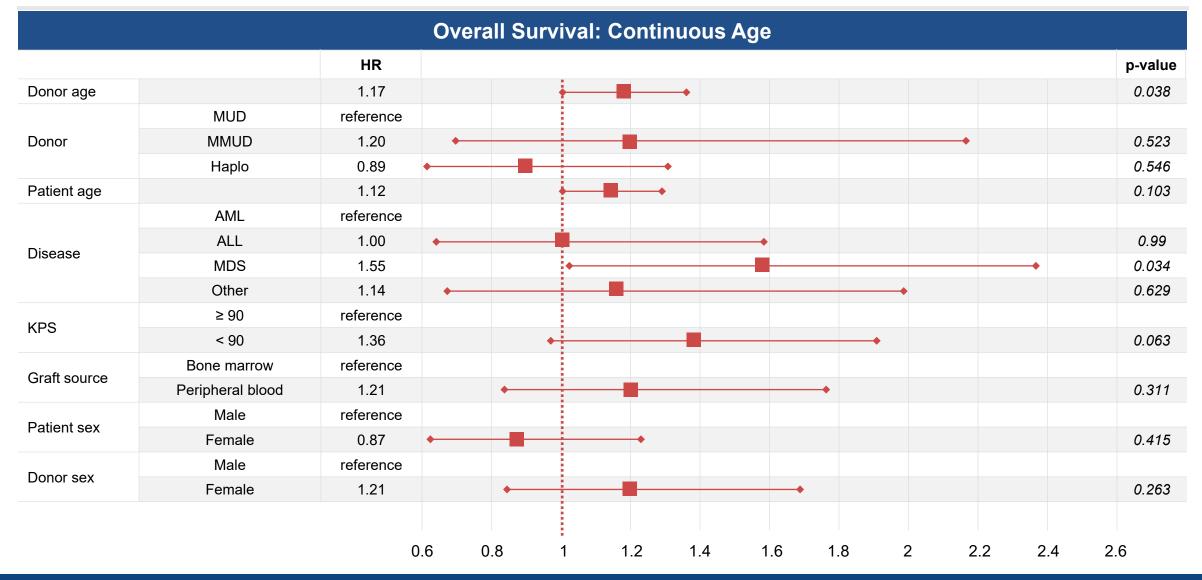
Baseline Characteristics: Donors

PARAMETER	Value	Donor ≤ 30y (n=334)	Donor > 30y (n=326)
Sex	Male	226 (68%)	195 (60%)
	Female	108 (32%)	130 (40%)
Donor	MUD	221 (66%)	146 (45%)
	MMUD	24 (7%)	40 (12%)
	Haplo	89 (27%)	140 (43%)
Graft Source	Bone marrow	125 (37%)	114 (35%)
	Peripheral blood	209 (63%)	212 (65%)

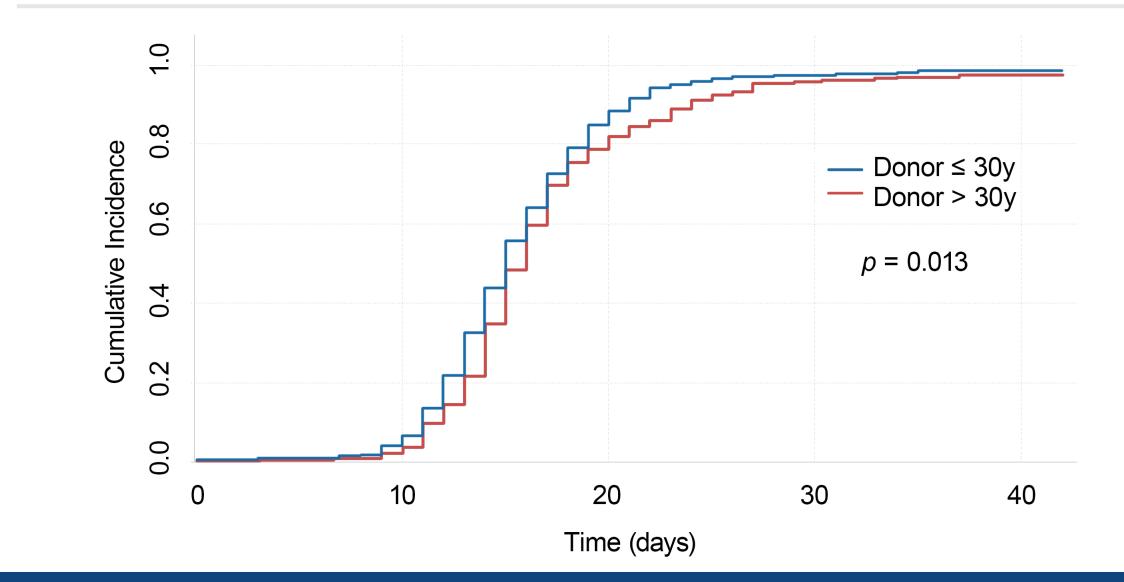
Overall Survival is Associated with Donor Age



Overall Survival by Donor Age — Multivariable Analysis: 17% Excess Risk for Every Additional Decade of Donor Age



Neutrophil Recovery is More Rapid in Patients with Younger Donors



Conclusions

- Donor age is an important consideration for donor selection
- In patients transplanted with unrelated or haploidentical related donor grafts in recent years, younger donor age (≤ 30 years) was associated with improved time to neutrophil recovery, non-relapse mortality and overall survival
- This analysis did not include data for umbilical cord blood, for which donor age is not a relevant variable
- Other factors that may be associated with HSCT outcomes should also be considered
- Advances in the development of graft sources and new approaches to prioritizing donors may broaden the availability of HSCT and improve patient outcomes

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