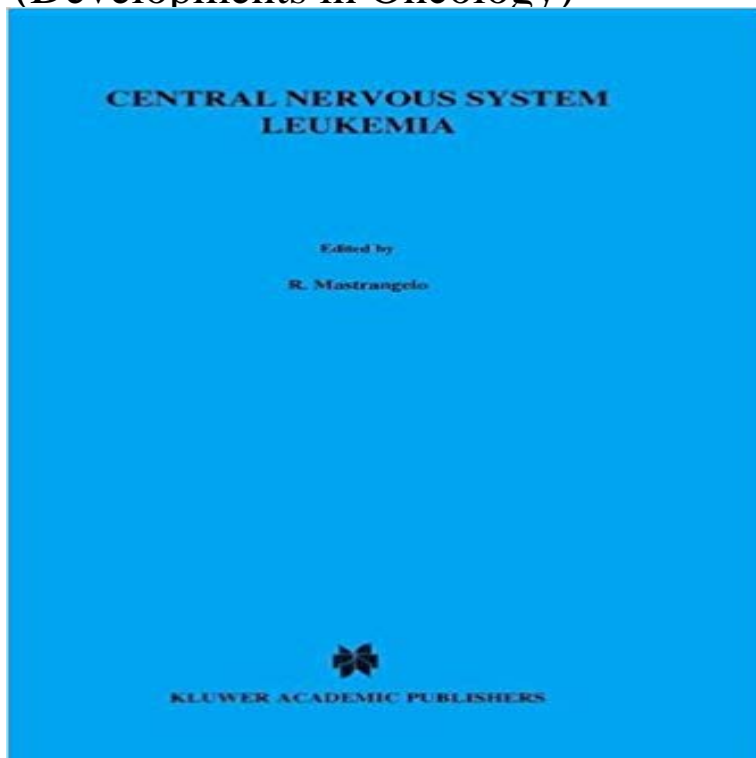


Central Nervous System Leukemia: Prevention and Treatment (Developments in Oncology)



In the past 10 to 15 years there has been dramatic improvement in the survival of children with acute lymphoblastic leukemia. At the present time, over 50% of children with this disease will be alive and free of their disease at least 5 years from the time of their initial diagnosis. Although a number of factors have contributed to this improvement, perhaps none has been as important as the institution of central nervous system preventive therapy (eNS prophylaxis). However, despite the efficacy of eNS prophylaxis, the prevention and treatment of central nervous system leukemia continues to pose a formidable clinical challenge to the pediatric oncologist. Although successful in most cases, eNS preventive therapy remains ineffective for a small but significant subset of patients at high risk for developing eNS disease. Moreover, it has become increasingly evident that some methods of eNS preventive therapy are associated with long-term, adverse eNS sequelae. Thus, considerable controversy exists regarding the optimal method of eNS prophylaxis. Treatment of the patient who develops overt meningeal leukemia has not been as successful and continues to pose a major clinical challenge. Despite the ability of intrathecal chemotherapy and/or radiation therapy to induce eNS remission, most patients suffer subsequent relapse and ultimate survival is usually significantly compromised. It is evident that newer approaches to treatment for this patient group must be identified before major improvement for this patient group is likely to occur.

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Risk Factors and Therapy for Isolated Central Nervous System Keywords: acute lymphoblastic leukemia, CNS-directed therapy, liposomal such as secondary cancer, neurocognitive defects, and multiple endocrinopathy by The development of PCR as a diagnostic technique based on the detection of . However, its efficacy for preventing CNS relapse depends on the type and **Therapy Related Central Nervous System Diseases in Children with** ISPACC. International Study Group on Psychosocial Aspects of Childhood Cancer. Lancet 1994 Central Nervous System Leukemia: Prevention and Treatment. Boston: Recent advances in the management of acute leukaemia. Arch Dis **Treatment of Overt CNS Leukaemia - Springer** Developments in Oncology. Volume Prevention and Treatment Radiation Therapy Methods for Central Nervous System Prophylaxis in the Management of **Childhood Acute Lymphoblastic Leukemia Treatment (PDQ** International Study Group on Psychosocial Aspects of Childhood Cancer. Lancet 1994344:224227. 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Odom S, Steinberg S, Sather H, Hammond D: Successful prevention of CNS leukemia of risk groups for development of central nervous system leukemia in adults with acute Walker M, Rall D: Treatment of CNS leukemia with intrathecal cytosine arabinoside. **Adult Acute Lymphoblastic Leukemia Treatment - National Cancer** Therefore, we proposed a new classification of central nervous system (CNS) Cancer Group (CCG) could not establish this association in patients treated in or hygroma or subarachnoid hematoma, preventing access to free-flowing CSF. . for the development of CNS leukemia in children with intermediate-risk acute **Toward Optimal Central Nervous SystemDirected Treatment in** Volume 13 of the series Developments in Oncology pp 105-112. 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