# EXTRACORPOREAL PHOTOPHERESIS FOR PATIENTS WITH STEROID-REFRACTORY GRAFT-VERSUS-HOST DISEASE

SPANISH FULL TEXT

## SUMMARY

**Introduction**: Graft-versus-host disease (GVHD) is a frequent complication after bone marrow transplantation, and can be acute (a-GVHD) or chronic (c-GVHD). Around 50% of patients with GVHD do not respond to treatment with steroids and need some alternative therapy. Extracorporeal photopheresis is a procedure that entails the filtering of a proportion of a patient's blood and exposure to a light sensitive drug which will result in an immune response.

**Objectives**: To assess the effectiveness and safety of photopheresis as treatment for GVHD refractory to steroids.

**Methods**: A review was made of the scientific literature until 13 November 2013, with a subsequent update until 15 January 2014, using the following databases:

-those specialising in systematic reviews, such as HTA (Health Technology Assessment), DARE (Database of Abstracts of Reviews of Effectiveness), NHS EED (NHS Economic Evaluation Database) and the Cochrane Library Plus; and,
-general databases, such as Medline, Embase and ISI Web of Knowledge (WOK).

**Results**: Two clinical practice guidelines were retrieved from the bibliographic search, addressing the diagnosis and treatment of the acute and chronic forms of GVHD respectively. In addition, the search also located two systematic reviews, one Italian and the other Canadian, with recommendations by experts. In the case of a-GVHD, the results on effectiveness showed that photopheresis registered elevated response rates (68%-82%) in cutaneous manifestations in both adult and paediatric patients, with survival rates of 47% at 4 years in adult and 70% at 5 years in paediatric patients. In the case of c-GVHD, the response rates in cutaneous symptoms were 31%-59% in adults and 55%-83% in paediatric patients, with a 5-year survival rate of 77%-96%. In acute and chronic GVHD alike, the adverse effects were mild and quite infrequent, and the technique was well tolerated.

**Conclusions**: Extracorporeal photopheresis displays a good safety profile. Patients with GVHD, both acute and chronic, who present with cutaneous manifestations and are treated with photopheresis show a clinical benefit at the level of response to treatment.