

Treating Acute Myelogenous Leukemia

INFORMATION FOR PATIENTS AND FAMILIES

The primary treatment for AML is chemotherapy. Two rounds of chemotherapy are used, meaning that you will need to be in the hospital for two different visits. Occasionally, your doctor may recommend that you receive a third round of treatment. Talk it over carefully with your doctor. Treating leukemia with chemotherapy has an excellent success rate, and most patients will go into remission, which means all signs and symptoms disappear.

Induction therapy

The first round of treatment is known as induction therapy. The purpose of this chemotherapy is to induce, or bring about, a remission in your leukemia. During induction therapy you will need to remain in the hospital until your white count rises to a level high enough to keep you safe from infections. The white cell most responsible for fighting off infections is called the neutrophil. Your neutrophil count is a portion of your total white count. You will be discharged when your neutrophil count is 500 or greater, unless you have other complications. You can expect to remain in the hospital approximately four weeks for induction therapy.

For the first seven days of your hospital stay you will be given two chemotherapy drugs, AraC and Idarubicin. AraC will be given continuously for seven days using a regular IV. Idarubicin is given once a day for three days. Your nurse places it into your CVC. It usually takes about 15 minutes. Because of the schedule of treatment, we often refer to induction chemotherapy as "7&3."

The purpose of chemotherapy is to destroy the leukemic cells. However, chemotherapy also affects the good cells in your body, resulting in a decrease in your white count, red count and platelets. While you are in the hospital, you will be given antibiotics to help prevent an infection. If you develop an infection or run a fever, you will get stronger antibiotics. You will get blood transfusions of red blood cells if your red count (or PCV) drops below 25%, and you will get transfusions of platelets if your platelet count drops below 10,000 or if you show signs of bleeding too easily.

Consolidation therapy

The second round of chemotherapy is called consolidation therapy. The purpose of this round is to "consolidate" your remission, to try to make sure you remain in remission. It is commonly called HiDAC. You will receive a higher dose of AraC, and in consolidation therapy you will get AraC twice a day for approximately two hours each time. Since higher doses of AraC can

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affect your brain and cause you to move your hands and feet awkwardly and very rarely cause personality changes, your nurse will check your nerve function before each dose. You will also receive three doses of Daunorubicin, and you can expect to remain in the hospital for approximately 6 weeks while your bone marrow recovers.

The next step

If your leukemia returns after this treatment, you will get different chemotherapies to try for another remission. Your doctor may also recommend a bone marrow transplant. If you would like more information about a bone marrow transplant, please ask your doctor or nurse.