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*DECENIO DE LA IGUALDAD DE OPORTUNIDADES PARA MUJERES Y HOMBRES
" AÑO DEL FORTALECIMIENTO DE LA SOBERANÍA NACIONAL "*

HEMATOLOGÍA

➤ **Clinical features and outcome of *Aeromonas sobria* bacteremia in pediatric and adult patients with hematologic malignancies: A single-center retrospective study in Peru**

INVESTIGADORES: Bryan Valcarcel, Gabriel De-la-Cruz-Ku, Luis Malpica, Daniel Enriquez-Vera.

REVISTA: PLoS One 2021 Aug 11;16(8):e0255910. doi: 10.1371/journal.pone.0255910. eCollection 2021.

ABSTRACTO: Background: Previous studies have found that healthcare-associated bacteremia (HAB) by *Aeromonas* species is associated with mortality. However, there is limited data on this outcome in patients with hematologic malignancies. This study aimed to identify the clinical features of patients with malignant hematologic diseases diagnosed with *Aeromonas sobria* bacteremia and to evaluate whether the type of bacteremia, community-acquired bacteremia (CAB) or HAB, is associated with mortality. Methods: We retrospectively reviewed the clinical records of pediatric and adult patients between January 2000 and December 2017. Clinical characteristics were compared between CAB and HAB. Additionally, we stratified based on age group. Survival outcomes were assessed with Kaplan-Meier curves and a multivariate Cox regression analysis. Results: A total of 37 patients (median age 24 years) were identified; 23 (62%) had HAB and 14 (38%) had CAB. Overall, the most common presenting symptom was abdominal pain (41%). Acute lymphoblastic leukemia ($n = 12/15$, 80%) and acute myeloid leukemia ($n = 8/22$, 36%) were the primary hematologic malignancies in pediatric and adult patients, respectively. CAB patients had worse overall survival (OS) rates at 30 days in all (43% versus HAB 91%, $p = 0.006$) and adult patients (30% versus HAB 92%, $p = 0.002$). Cox regression analysis found that quick Sequential Organ Failure Assessment and CAB were statistically significant factors associated with mortality. Low antimicrobial-resistant was noted, except for ciprofloxacin ($n = 5/37$, 14%). Conclusion: Our study found a worse OS among patients with hematologic malignancies and CAB by *Aeromonas sobria*. Our results suggest that patients with CAB present with a worse disease severity. These findings should aid clinicians to determine the survival prognosis in this population.

➤ **An international, multicenter, retrospective study on the positive impact of cutaneous involvement on the clinical outcome of adult T-cell leukemia/lymphoma**

INVESTIGADORES: Luis Malpica, Denisse Castro, Daniel J Enriquez, Roberto Oviedo-Pecho, Camila Peña, Henry Idrobo, Lorena Fiad, Maria Prates, Bryan Valcarcel, Antonio Paredes, Gadwyn Sánchez, Celia Moisés, Jorge J Castillo, Luis Villela, Juan C Ramos, Mirna Biglione, Brady E Beltran, Grupo de Estudio Latinoamericano de Linfoproliferativos (GELL).

REVISTA: Leuk Lymphoma 2021 Sep 29;1-11. doi: 10.1080/10428194.2021.1984455.

ABSTRACTO: Adult T-cell leukemia/lymphoma (ATLL) is a largely incurable disease. Cutaneous involvement is common and could be first symptom of the disease. We analyzed 169 patients with ATLL of whom 63 had cutaneous involvement. Cutaneous involvement was found in 48, 27, 17, and 60% of acute, lymphomatous, chronic and smoldering ATLL cases, respectively. Eight cases had primary cutaneous tumoral variant. Erythroderma (24%) and plaques (22%) were the most frequent skin lesions. The presence of cutaneous involvement was associated with better overall survival compared to

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non-cutaneous involvement (aHR 0.55 [95% CI: 0.37-0.82], $p < 0.01$; 1-year OS 53 vs. 27%, respectively, $p = 0.012$). Combination zidovudine and interferon-alpha (AZT-IFN) yielded high response rates (overall response, OR = 100%, $n = 8$; complete response 62.5%) compared to chemotherapy (OR = 33.3%, $n = 12/36$). In conclusion, cutaneous involvement was associated with better survival in Latin American patients with ATLL. AZT-IFN demonstrated encouraging responses in ATLL patients with cutaneous involvement.