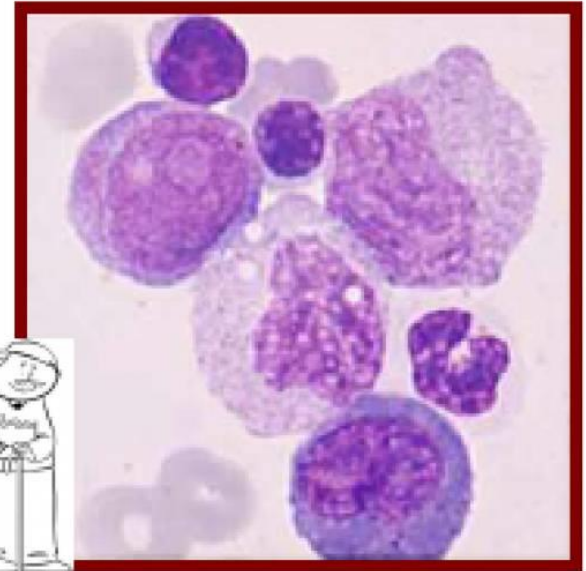


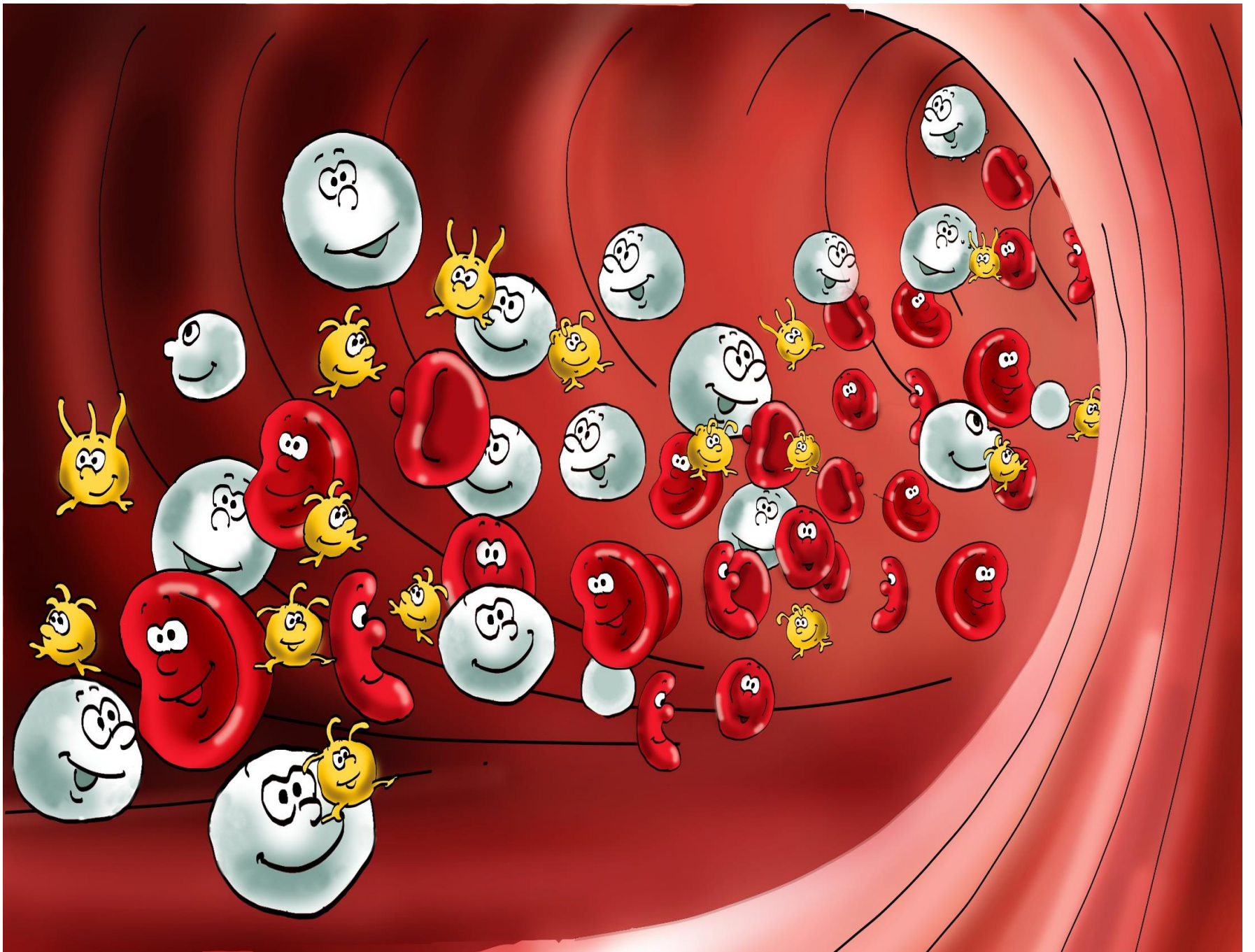
1° FORUM NAZIONALE **AIPASIM**

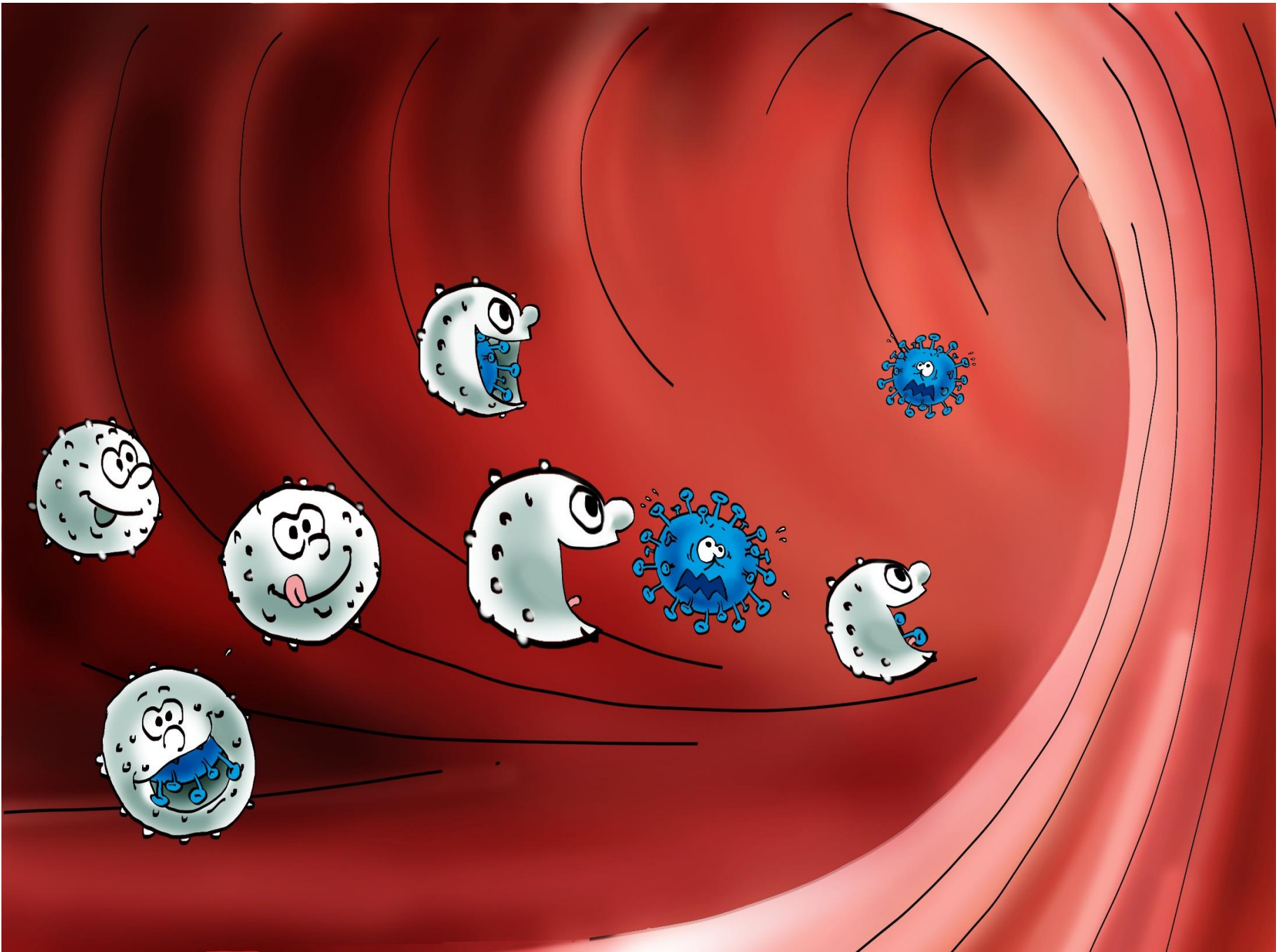
# **SINDROME MIELODISPLASTICA:**

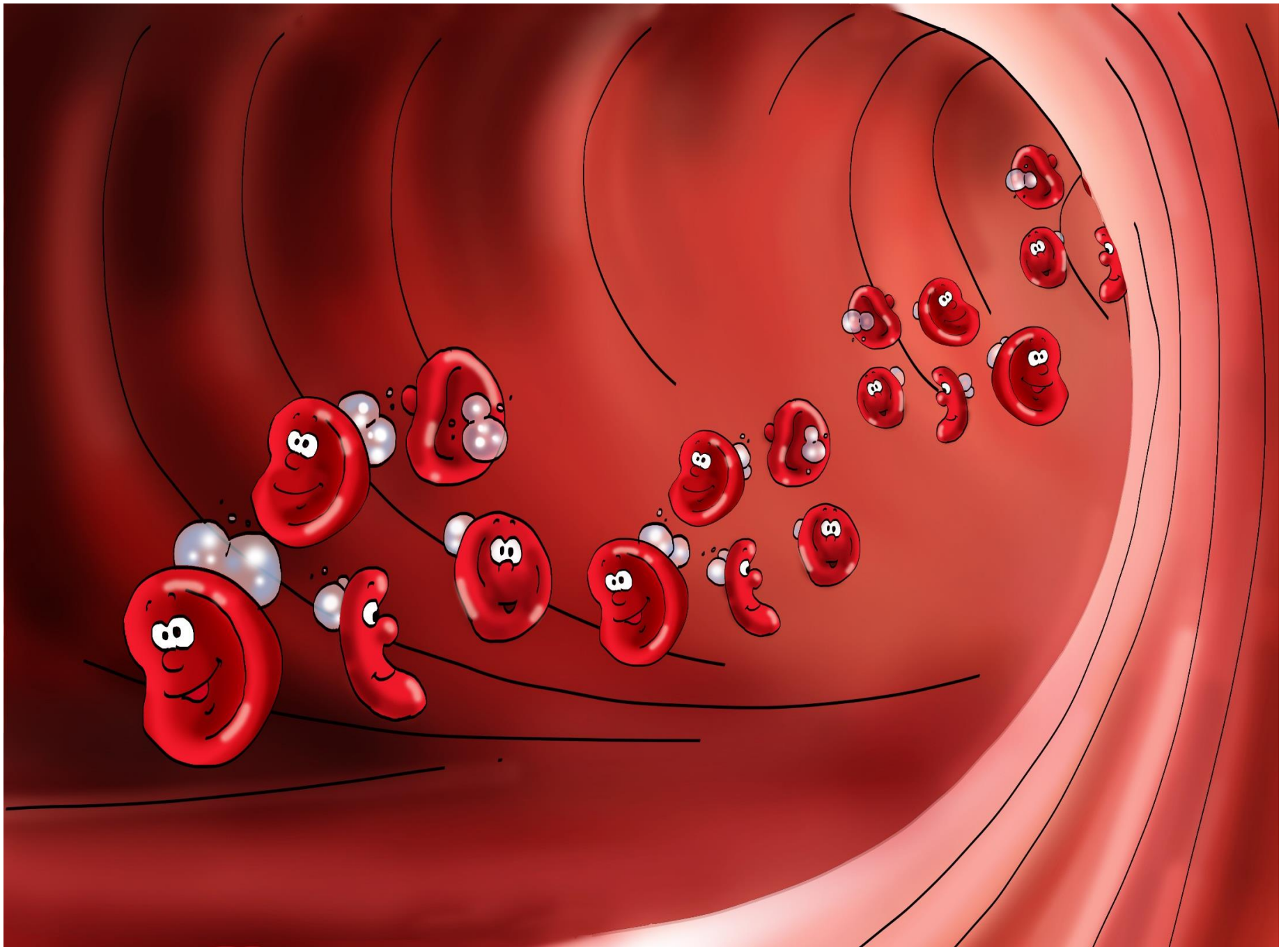
**PAZIENTI, MEDICI  
E ISTITUZIONI A CONFRONTO**

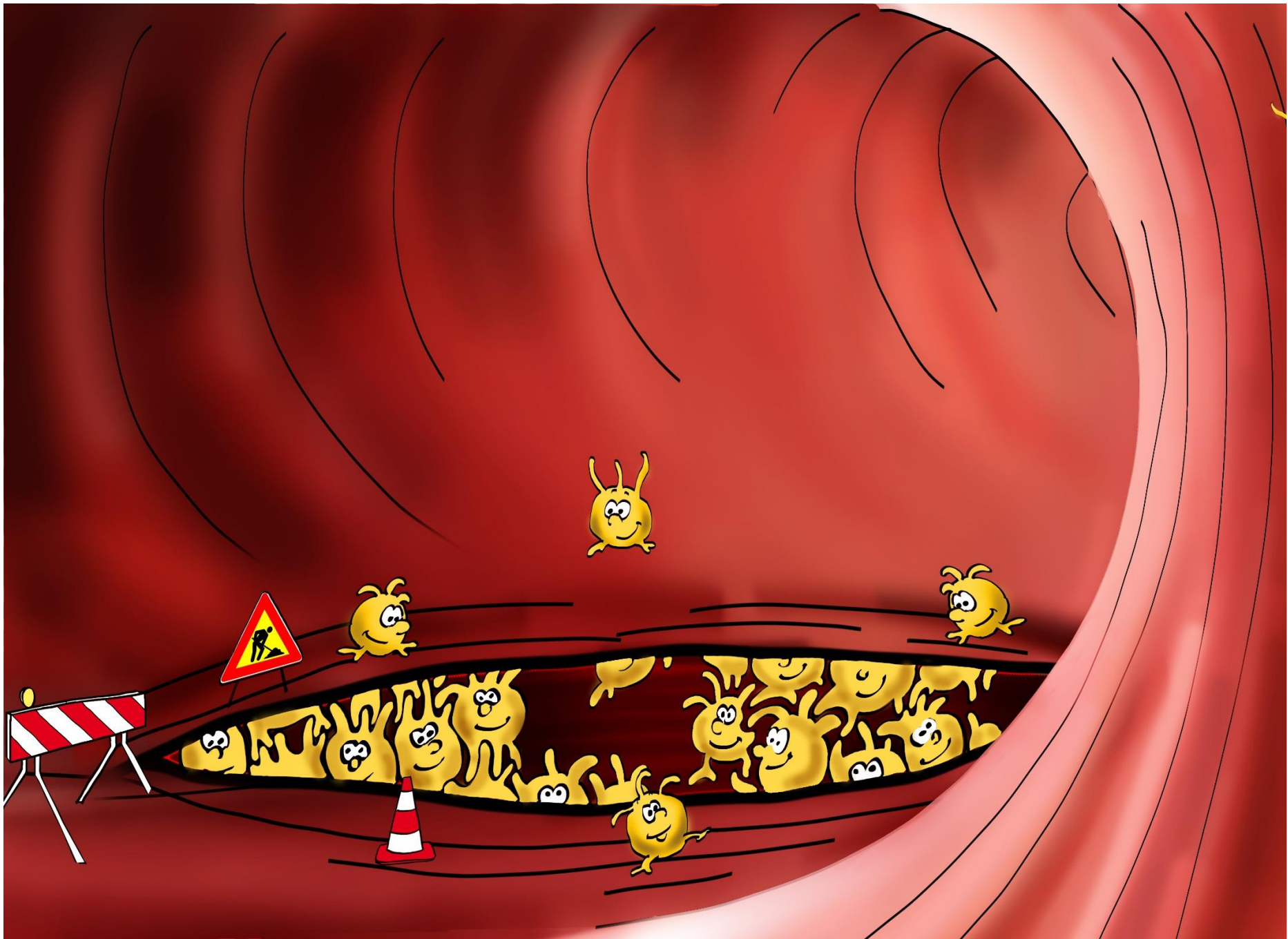


**Cosa è la Sindrome Mielodisplastica.  
Quali sono i sintomi e gli esami necessari di  
inquadramento**



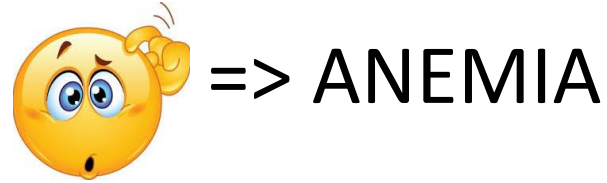






WBC (Globuli bianchi)	<b>6,08</b>	x10 <sup>3</sup> /uL	4,00 - 10,00
RBC (Globuli Rossi)	<b>4,59</b>	x10 <sup>6</sup> /uL	4,50 - 6,00
HGB (Emoglobina)	<b>13,30</b>	gr/dl	13,00 - 17,50
HCT (Ematocrito)	<b>38,90</b>	%	38,00 - 48,00
MCV	<b>84,70</b>	fL	82,00 - 98,00
MCH	<b>29,00</b>	pg	27,00 - 32,00
MCHC	<b>34,20</b>	gr/dl	32,00 - 37,00
RDW-CV	<b>12,40</b>	%	11,50 - 14,50
PLT (Piastrine)	<b>193</b>	x10 <sup>3</sup> /uL	150 - 450
<b>Formula Leucocitaria</b>			
NEUT %	<b>50,7</b>	%	
LYMPH %	<b>37,5</b>	%	
MONO %	<b>5,9</b>	%	
EO %	<b>5,6</b>	%	
BASO %	<b>0,3</b>	%	
NEUT	<b>3,08</b>	x10 <sup>3</sup> /uL	
LYMPH	<b>2,28</b>	x10 <sup>3</sup> /uL	
MONO	<b>0,36</b>	x10 <sup>3</sup> /uL	
EO	<b>0,34</b>	x10 <sup>3</sup> /uL	
BASO	<b>0,02</b>	x10 <sup>3</sup> /uL	

- GLOBULI ROSSI BASSI



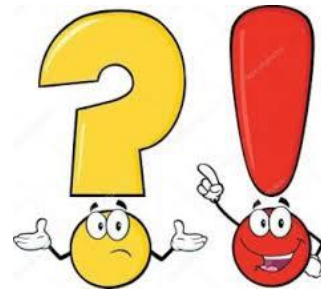
- GLOBULI BIANCHI (NEUTROFILI) BASSI



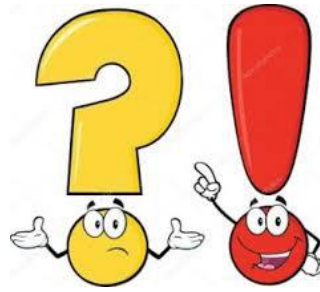
- PIASTRINE BASSE






**CITOPENIE**



# SINTOMI



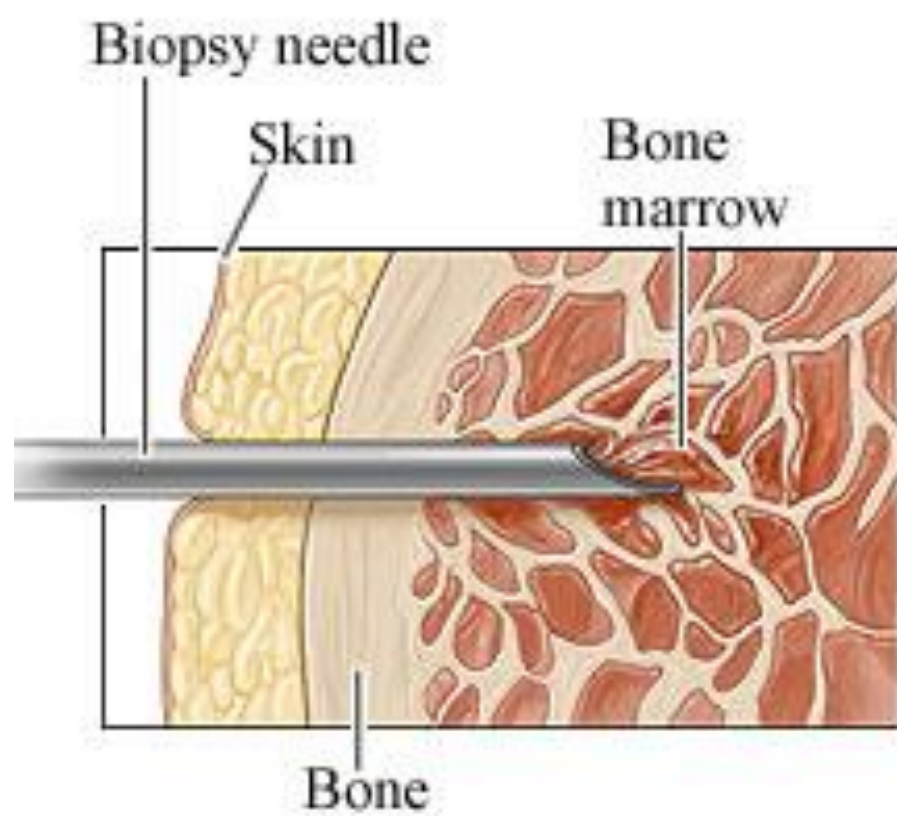
- ANEMIA  => tachicardia, affanno, stanchezza
- NEUTROPENIA  => predisposizione alle infezioni
- PIASTRINOPENIA => tendenza alle emorragie 

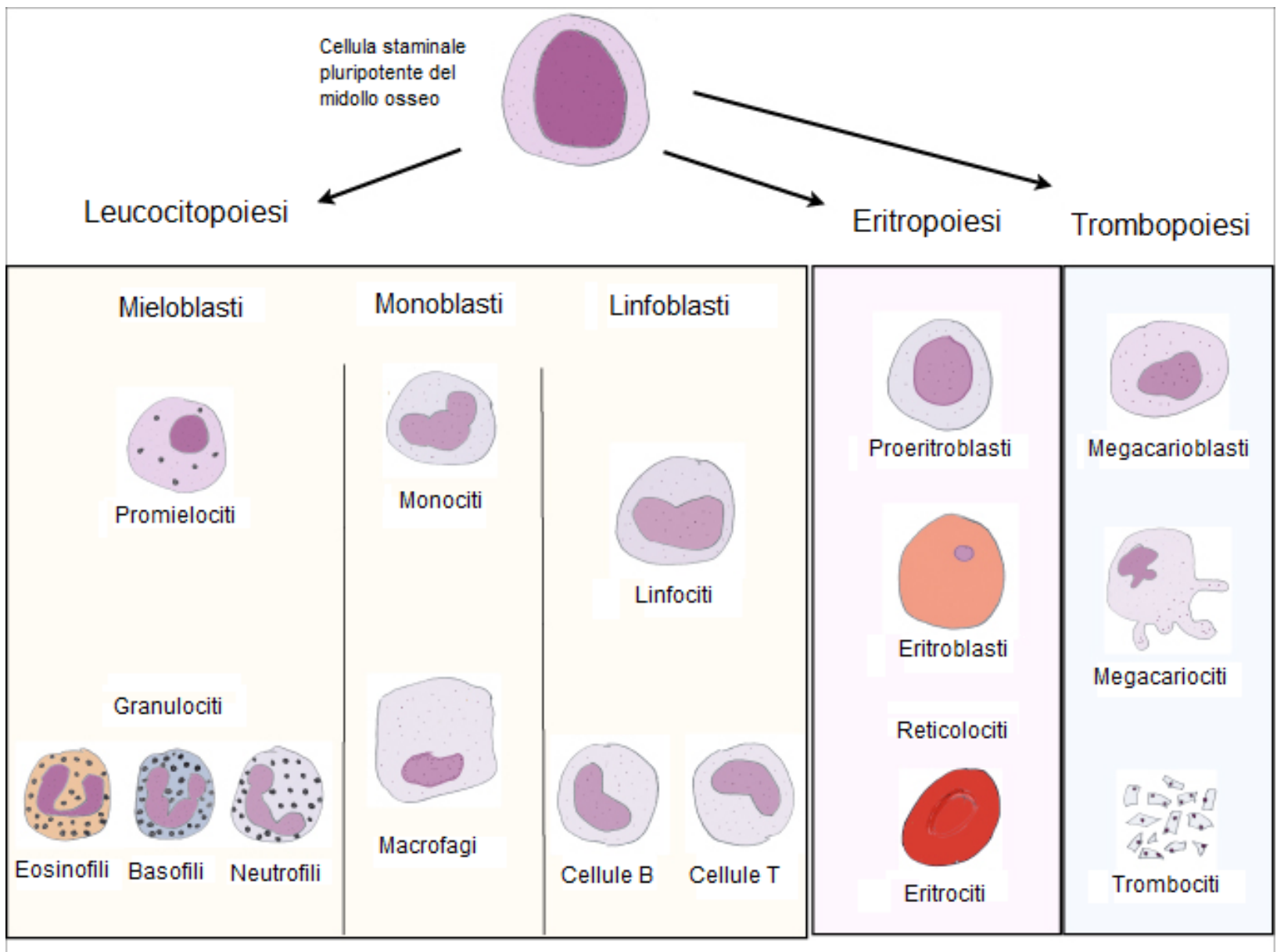


# Cosa fare in caso di citopenia?

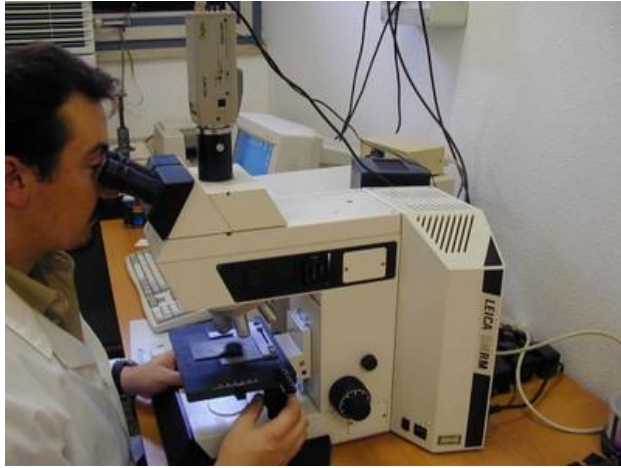


- Alcuni esami del sangue possono essere utili per trovarne la causa....
  - Carenza di ferro
  - Carenza di vitamine
  - ...
- Ma se non si trovano cause e la citopenia persiste o peggiora???



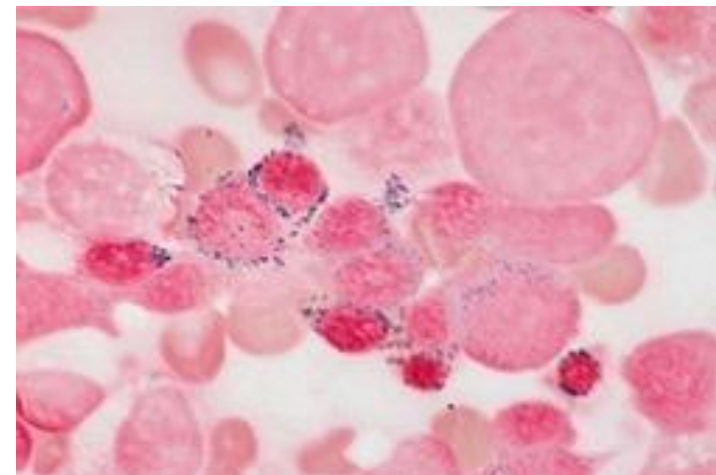
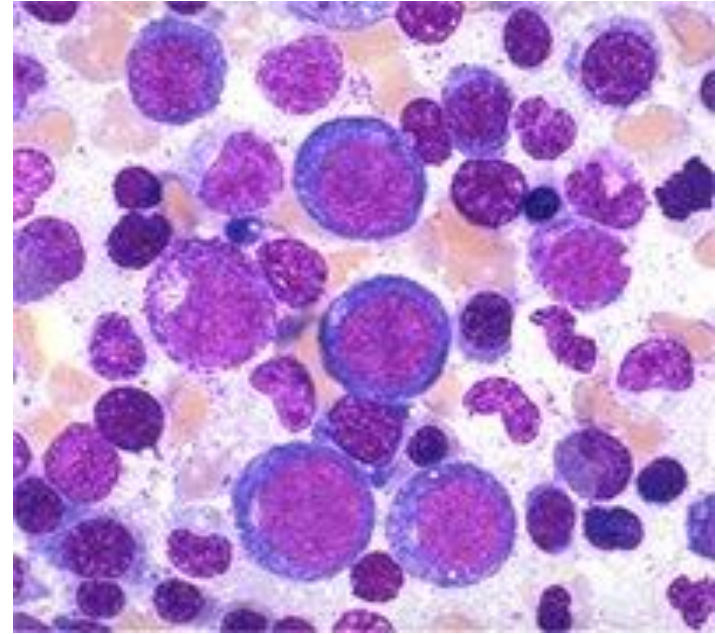


# Esame citologico

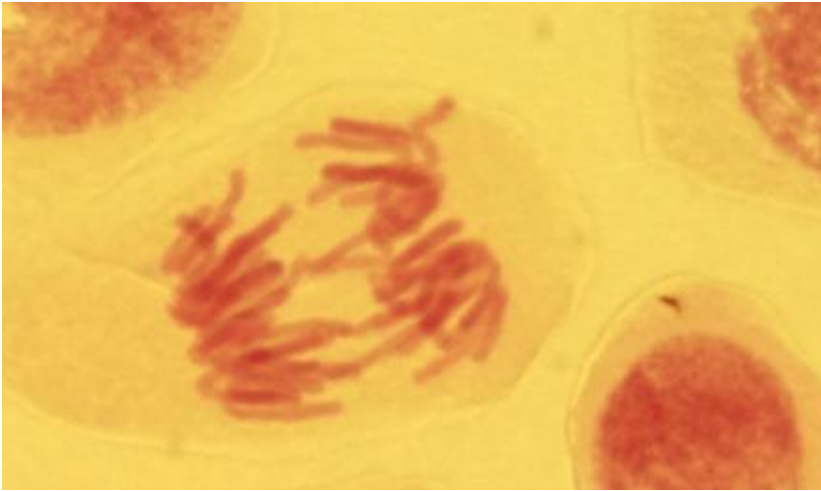


Permette la diagnosi di sindrome mielodisplastica se:

- si notano anomalie nella maturazione dei precursori degli elementi ematici
- Si nota un incremento degli elementi immaturi (blasti) tra il 5 e il 20%
- Ci sono i sideroblasti ad anello

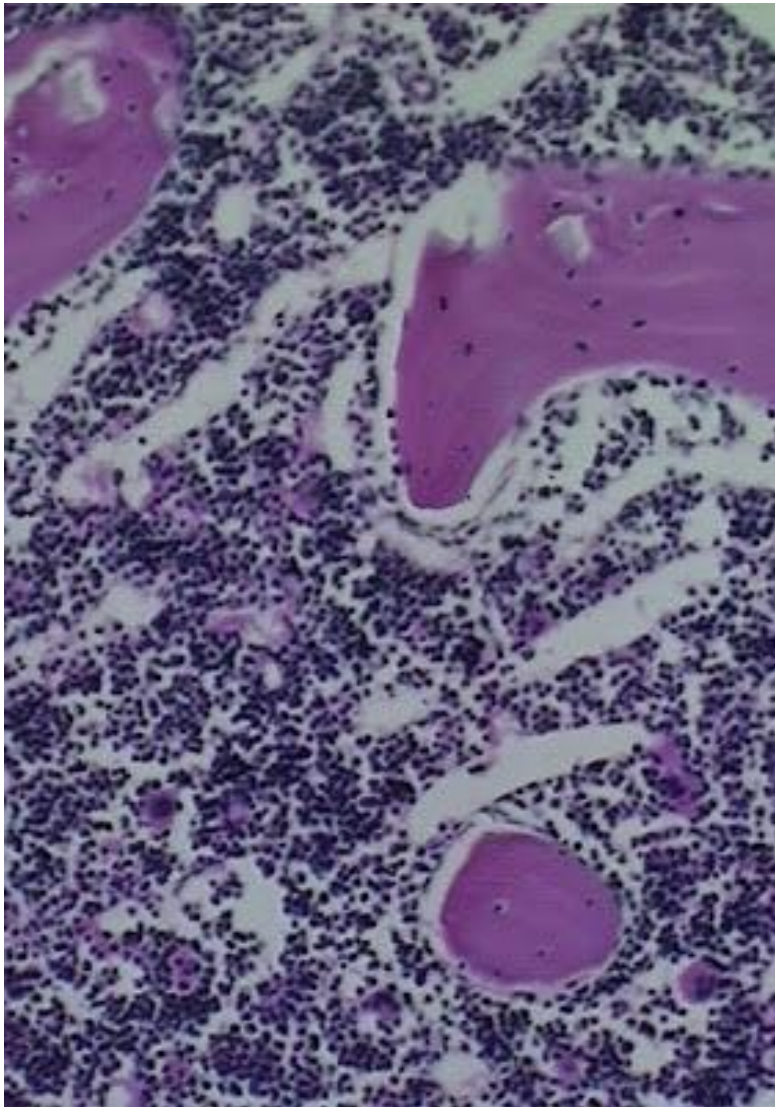


# Esame citogenetico



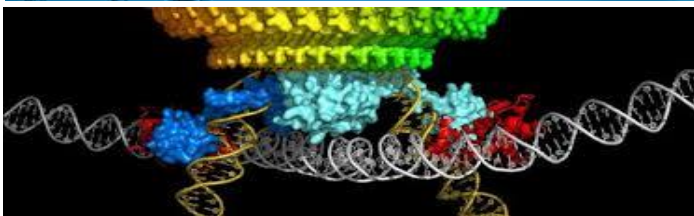
- Analizza il DNA delle cellule midollari attraverso lo studio dei cromosomi
- E' normale in circa la metà dei casi di sindrome mielodisplastica
- Aiuta a capire la prognosi della malattia

# Biopsia Osteomidollare

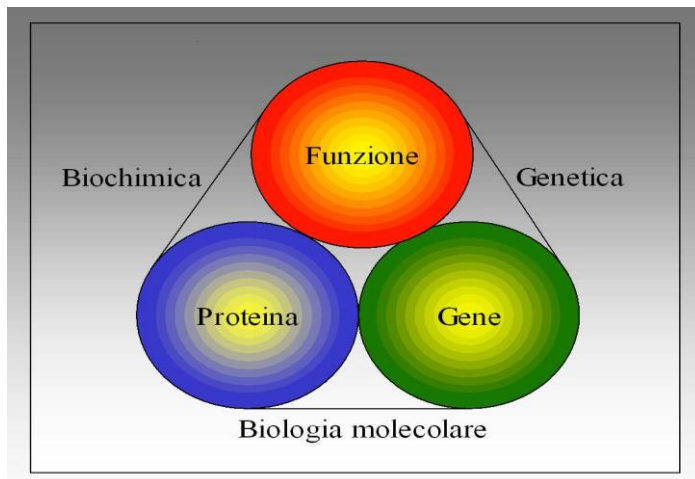
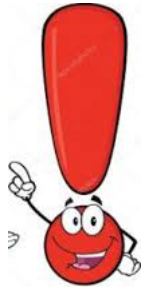


- Serve per escludere altre patologie che possono presentarsi allo stesso modo
- Serve per valutare alcune caratteristiche ulteriori
  - Cellualrità
  - Fibrosi

# Biologia molecolare (ricerca di mutazioni di geni)



- Utile solo in casi particolari
  - In caso di presenza di sideroblasti ad anello nell'esame citologico
  - In caso di presenza della delezione del braccio lungo del cromosoma 5



# Prognosi: IPSS-R

Prognostic variable	Score							
	0	0.5	1.0	1.5	2.0	3.0	4.0	
Karyotype*	Very Good		Good		Intermediate		Poor	Very Poor
Bone marrow blasts (%)	≤2		3-4		5-10		>10	
Hemoglobin	>10		8-10		<8			
Platelet	≥100		50-99		<50			
ANC	≥800		<800					

## \*Karyotype:

**Very Good:** -Y, del(11q)

**Good:** Normal, del(5q), del(12q), del(20q), double including del(5q)

**Intermediate:** del(7q), +8, +19, +i(17q), any other single or double independent clones

**Poor:** -7, inv3/t(3q)/del(3q), double including -7/del(7q), complex: 3 abnormalities

**Very Poor:** complex: >3 abnormalities

Score	IPSS-R subgroup
≤1.5	Very low
2-3	Low
3.5-	
4.5	Intermediate
5-6	
>6	High
	Very high

La prognosi guida le scelte terapeutiche





Grazie per l'attenzione