

## [Abstract 28]

### PROGNOSTIC VALUE OF SERUM B2-MICROGLOBULIN IN PATIENTS WITH WALDENSTROM'S MACROGLOBULINEMIA REQUIRING TREATMENT

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Waldenstrom's macroglobulinemia is a lymphoplasmacytic lymphoma characterized by the production of monoclonal IgM. This disorder has a relatively indolent course with a median survival ranging from 5 to 10 years in different series. Several clinical and laboratory variables have been associated with an inferior survival such as advanced age, hyperviscosity, presence of cytopenias and hypoalbuminemia. More recently, serum  $\beta_2$ -microglobulin ( $\beta_2m$ ) is being investigated for its potential role in stratifying patients with WM into different subsets. Dhodapkar et al reported that patients who received primary treatment with fludarabine with baseline  $\beta_2m$   $<2.5$ ,  $2.5$  to  $<5$  and  $> 5$  mg/dL had a five year survival of 82%, 65% and 47% respectively (Sem Oncol 2003;30:220). In order to confirm these observations we analyzed 110 patients with available pretreatment value of  $\beta_2m$  who required treatment. These patients received primary treatment consisting of alkylating agents, nucleoside analogues or rituximab. Their median age was 70 years (range 28 to 85 years) and their median survival was 110 months. Multiple clinical and laboratory parameters were evaluated for their possible correlation with overall survival. Age and  $\beta_2$ -microglobulin were the main predictive variables. The median survival of patients with  $\beta_2m$   $<2.5$ ,  $2.5$  to  $<5$  and  $> 5$  mg/dL was 106, 116 and 65 months respectively ( $p=0.01$ ). We attempted to assess the prognostic significance of  $\beta_2m$  in a subset of 57 patients  $< 70$  years of age at the time of initial treatment. We could not find a statistically significant correlation but the number of events in this group was small ( $N=10$ ). We conclude that elevated serum  $\beta_2m$  ( $>5$  mg/dl) is an important parameter associated with inferior survival of patients with WM requiring treatment. Larger studies and longer follow-up are required in order to confirm our observations. It may be of particular interest to assess the prognostic value of elevated serum  $\beta_2m$  in patients  $< 70$  years of age since in this patient cohort high dose therapy may be applicable.