

Board of Directors 2009-2012

Hassan El-Solh, MD
Chairman

Ardeshir Ghavamzadeh, MD
Vice Chairman

Mahmoud Aljurf, MD, MPH
Scientific Director

Fazal Hussain, MD, MPH
Treasurer

Directors:

Algeria

Redhouane Ahmed Nacer, MD
Rosemarie Hamladji, MD

Egypt

Hossam Kamel Mahmoud, MD
Alaa Elhaddad, MD

Iran

Kamran Alimoghadam, MD
Amir Ali Hamidieh, MD

Jordan

Fawzi Abdel-Rahman, MD

Lebanon

Ahmad Ibrahim, MD

Morocco

Said Benchekroun, MD

Oman

David Dennison, MD

Pakistan

Salman-Naseem Adil, MD

Saudi Arabia

Fahad Al Mohareb, MD
Abdulaziz Alabdulaaly, MD

Syria

Raja Mouna, MD

Tunisia

Tarek Ben Othman, MD
Saloua Ladeb, MD

EMBMT

EASTERN MEDITERRANEAN
BLOOD AND MARROW
TRANSPLANTATION



NEWSLETTER

VOLUME 1, ISSUE 1

MARCH 2011

Chairman's Message

Hassan El Solh, MD



I would like to congratulate you on the tremendous success of the 5th EMBT Business meeting held in Beirut, Lebanon in Nov 2010. We all came out with this impression that EMBMT has now become a world class international organization. We were able to accomplish a lot in terms of review of the past performance, current activities and future plans. EMBMT Secretariat has a new office with additional staffing. Prior to this business meeting, an EMBMT-EBMT joint meeting was held in Vienna, Austria in April 2010, which was also a great success. EMBMT has become one of the founding societies of WBMT, in addition to EBMT, CIBMTR, WMDA and APBMT. EMBMT Scientific Committee has approved several members to serve as the

representatives of EMBMT for WBMT. EMPBMT Secretariat is working on the EMBMT Annual Report 2010 which will include the 4th EMBMT Activity Survey (HSCT Activity survey up to 2009), the bylaws, the members directory and the other information. This booklet will be sent to you very soon, you can also access through the website at www.embmt.org. We will be starting the new EMBMT Outcome Registration by using our own harmonized forms and hope to publish "EMRO data" from this project. The EMBMT is working on a unique number of your center, in concordance with WBMT to streamline the registered data. It has been a pleasure working with you all.

Please feel free to call me with your suggestions and questions at +966-1-4423949.

INSIDE THIS ISSUE :

EMBMT Secretariat	2
Editorial Note	2
EMBMT Working Committees	2
Working Committee Proposals	2
Purpose, Mission & Vision of EMBMT	3
EMBMT Registry	3
Important Dates	3
List of Publications	3
Spotlight	3
EMBMT Nursing	4

Leading stem cell transplant stories:

G-CSF may reactivate dormant virus in stem cells Granulocyte-colony stimulating factor (G-CSF), which is used to stimulate stem cell growth before bone marrow transplantation, may activate a virus that increases a patient's risk of infection. According to a report in the Sept. 16 issue of *Cell Host and Microbe*, G-CSH causes human cytomegalovirus, which is in a dormant or latent state in bone marrow, to reactivate in stem cells. **Cell Host & Microbe**, Volume 8, Issue 3, 284-291, 16 September 2010

Stem cell transplant may have cured patient's HIV infection A man who underwent a stem cell transplant to treat leukemia might have also been cured of HIV infection. According to a report in the advance online edition of *Blood*, IV was undetectable in the brain and cerebrospinal fluid 17 months

after the transplant.

Blood First Edition Paper, prepublished online December 8, 2010; DOI 10.1182/blood-2010-09-309591.

Stem cell transplants improve muscle function and mass Working in mice, scientists determined that transplanting specific types of stem cells into leg muscles prevented the loss of muscle function and mass that normally occurs with aging. According to a report in the Nov. 10 issue of *Science Translational Medicine*, when transplanted with attached myofibers from donor mice, the muscle stem cells underwent a 50% increase in mass and a 170% increase in size and remained elevated throughout the lifetime of the mice. *Science Translational Medicine* 10 November 2010: Vol. 2, Issue 57, p. 57ra83

EDITORIAL NOTE

EMBMT SECRETARIAT
Oncology Centre, KFSH&RC
P.O.Box 3354, MBC-64
Riyadh 11211
Saudi Arabia

Editor-in-Chief:
Mouhab Ayas, MD
mouhab@kfshrc.edu.sa

Secretary:
Irene Paat
irene_paat@embmt.org
www.embmt.org

EMBMT's 5th Meeting in Beirut, Lebanon

Mouhab Ayas, MD



Few weeks ago, and at the Habtoor Hotel in good old charming Beirut, the EMBMT held its fifth meeting. The atmosphere was professional and friendly, and one could feel the enthusiasm building up. During the business meetings and the scientific committees meetings, all members were eager to participate and enrich the conference with their scientific comments and well thought out observations; the atmosphere was further embellished by the pleasant and

friendly remarks made by different participants. The members also had their fair share of fun and entertainment outside the meetings. Breakfast and lunch were rich forums for tightening the social ties between the participants from different countries, and in the evenings, some of the members went out exploring the city. A walk in the old souks of Beirut, a stroll down the "corniche", a cup of tea at a small café by the seaside were all parts of a memorable gathering. EMBMT is surely gathering momentum, I am all hope that with the commitment of its members it will live up to the hopes of the scientific transplant communities in the East Mediterranean region and soon measure up to similar international societies.

EMBMT Working Committees

1. **Hemoglobinopathies:** Cellular therapy for B-Thalassemia, Sickle Cell Anemia and other hemoglobin disorders: **Chair:** Seyyed Asadollah Mousavi, MD
2. **Plasma Cell Disorders:** Cellular therapy for multiple myeloma and other plasma cell disorders. **Chair:** Saloua Ladeb, MD
3. **Lymphoma:** Cellular therapy for Hodgkin's and non-Hodgkin's lymphoma. **Chair:** Ali Bazarbachi, MD
4. **Pediatric Cancer:** Cellular therapy for childhood malignancies and other issues related to use of cellular therapy in children. **Chair:** Ayad Hussein Ahmed, MD
5. **Bone marrow failure disorders:** Cellular therapy for congenital and acquired bone marrow failure disorders in adult and pediatric age group. **Chair:** Mouhab Ayas, MD
6. **Acute Leukemia:** Cellular therapy for acute leukemias, preleukemia and myelodysplastic disorders. **Chair:** Omar Fahmi, MD
7. **Alternate Donor Transplantation, Histocompatibility, Donor health:** **Chair:** Amir Ali Hamidieh, MD
8. **Immune Deficiencies/Inborn Errors:** Cellular therapy for congenital and acquired immune deficiencies and inborn errors of metabolism. **Chair:** David Dennison, MD
9. **Chronic Leukemia:** Cellular therapy for chronic leukemias and myeloproliferative disorders. **Chair:** Mohamed Abdelmoty, MD
10. **Infection/Immune Reconstitution:** Prevention and treatment of post-transplant infections and issues related to recovery of immune function. **Chair:**
11. **HSCT/Graft vs. Host Disease and transplantation related toxicity:** Preparative regimens, prevention and treatment of early non-GVHD toxicities, acute and chronic GVHD. **Chair:** Kamran Alimoghaddam, MD
12. **Late effects, supportive care and Quality of Life:** Issues related to long term survivors of cellular therapy, including clinical and psychological effects of transplantation and HSCT supportive care. **Chair:** Naeem Chaudhri, MD
13. **Biomarkers and HSCT Translational Research:** Design, coordinate and execute translational laboratory research, standardizing and sharing relevant laboratory testing and establish a Biorepository for samples. **Chair:** Maher Albitar, MD

Working Committees Proposals:

1. The Outcome of Hematopoietic Stem Cell transplantation in children with Hemophagocytic Lymphohistiocytosis: a retrospective study from the EMBMT centers. -Ali Al-Ahmari, MD
2. Lymphoma - Ali Bazarbachi, MD
 - 2.1 Hodgkin lymphoma, Effect of salvage chemotherapy (ICE versus DHAP) Predictive factors for relapse. Effect of post-transplant radiotherapy
 - 2.2 Revlimid post transplant. Randomized study (revlimid versus placebo). Diffuse large B cell lymphoma or Hodgkin lymphoma in CR after APSCT
 - 2.3 Outcome of first line APSCT in high risk patients. Retrospective analysis. Diffuse large B cell lymphoma (age-adjusted IPI 2 or 3) in CR1
3. Myeloma - Ali Bazarbachi, MD
 - 3.1 Stem cell mobilization. Randomized study: etoposide and G-CSF versus cyclophosphamide and G-CSF. Primary end point: number of CD34 positive cells. Secondary end point: Toxicity. Approx. 100 patients
 - 3.2 Young myeloma (<40) Comparative outcome to patients >40. Number and percentage
 - 3.3 Effect of new drugs on outcome after APSCT for MM. All MM patients. Two time periods: 2000-2004 versus 2005-2009. Patients demographics. Use of Velcade, thalidomide, revlimid. Before APSCT, consolidation/maintenance after APSCT, at relapse. Primary end point: overall survival

The Purpose, Vision and Mission of EMBMT

Purpose

1. The group's aim is to promote all aspects of patient care, academic and research activities associated with hematopoietic stem cell transplantation (HSCT) in the region which include knowing the trends, patterns and status of the hematopoietic stem cell transplantation in Eastern Mediterranean (EM) countries.
2. To steer and regulate the HSCT Registry in EM region.
3. To share the knowledge and resources as much as possible in relation to HSCT.
4. To augment collaborative research in EM region.
5. To collaborate with other international organizations related to HSCT.
6. To support the establishment of Regional Unrelated Donor

Registry to augment alternate donor stem cell cells availability in the region.

7. To support the establishment of regional cord blood banks.
8. To establish standardization for quality control and accreditation.

Mission

To learn and share the HSCT activities, outcomes, education and research by means of integrated teamwork.

Vision

To become one of the leading international groups for Hematopoietic Stem Cell Transplantation and Research by close cooperation among regional centers, physicians, scientists, healthcare workers and patient advocates for optimization of patient care.

The purpose of the EMBMT Registry is:

- To serve as a representation of EMBMT to provide the updated status of hematopoietic stem cell transplantation (HSCT) in Eastern Mediterranean countries.
- To identify and highlight the unique issues of HSCT in the Eastern Mediterranean region.
- To create original data from Eastern Mediterranean region.
- To collaborate with other international HSCT registries.
- To serve as a resource for the health care providers in the field of HSCT for education & training, clinical research, trend analysis, strategic planning, improve an optimize the existing standards of care, comparative analysis and myriad of other uses.
- To encourage scientific publications and presentations for local, regional and International conferences.

EMBMT Central Data Center:

The EMBMT Registry is located in the Research Unit of King Faisal Cancer Center, KFSH&RC, Riyadh, Saudi Arabia. The data management training for the EMBMT Registry will be offered in Riyadh, by the consensus of the participating members.

IMPORTANT DATES

MEETING	DATE	VENUE
CIBMTR/ASBMT	February 17 – 21, 2011	Honolulu, Hawaii
EBMT	April 3 – 6, 2011	Paris, France
EMBMT Business	April 4, 2011	Paris, France
EMBMT Scientific	TBA	TBA

Please review your membership profile by visiting the membership directory at www.embmt.org. If you would like to update any information, please complete and return the new membership form to EMBMT Secretariat by email or fax. Forms can also be downloaded from the website.

List of Publications

1. Special issues related to hematopoietic SCT in the Eastern Mediterranean region and the first regional activity report. Aljurf MD, Zaidi SZ, El Solh H, Hussain F, Ghavamzadeh A, Mahmoud HK, Shamsi T, Othman TB, Sarhan MM, Dennison D, Ibrahim A, Benchekroun S, Chaudhri N, Labar B, Horowitz M, Niederwieser D, Gratwohl A. Bone Marrow Transplant. 2009 Jan;43(1):1-12.
2. Status of hematopoietic stem cell transplantation in the WHO Eastern Mediterranean Region (EMRO). Aljurf M, Zaidi SZ, Hussain F, Ghavamzadeh A, Alimoghaddam K, Jahani M, Mahmoud HK, Haddad A, Adil S, Ben Othman T, Sarhan MM, Dennison D, Ibrahim A, Benchekroun S, Ayas M, Al Zahrani H, Al Mohareb F, El Solh, H. Transfus Apher Sci. 2010 Apr;42(2):169-75.
3. Trends of Hematopoietic Stem Cell Transplantation in the Eastern Mediterranean Region, 1984-2007. Accepted for Publication by Journal " *Biology of Blood and Marrow Transplantation*". S.O. Ahmed1, A. Ghavamzadeh2, S. Zaidi3, H. Baldomero4, M. Pasquini5, F. Hussain1, K. Alimoghadam2, F. Al Mohareb1, M. Ayas1, A. Hamidieh2, H. Mahmoud6, A. Elhaddad6, T. Ben Othman7, A. Abdelkefi7, M. Sarhan8, F. AbdelRahman8, S. Adil9, S. Alkindi10, A. Bazarbachi11, S. Benchekroun12, D. Niederwieser13, M. Horowitz5, A. Gratwohl14, H. El Solh1, M. Aljurf1
4. Alternate Donor Transplantation (in progress)
5. Eastern Mediterranean Blood and Marrow Transplantation (EMBMT) Group, Special communication (in progress)

EMBMT NURSING GROUP

King Faisal Specialist
Hospital & Research Centre
PO. Box 3354, MBC-64,
Riyadh, Saudi Arabia

Office

+966-1-4647272 Ext. 39976

Fax

+966-1-4424973

**Board of Directors
2009-2012**

Reggie Belkhedim
Chairman

Amal Mohammed
Vice Chairman

Rahma Al Mahrizi
Secretary

Directors:**Iran**

Omolbabib Bakti
Sohela Kalilvand

Jordan

Obada Kafawneh

Lebanon

Hussein Makkieh
Samar Okaily

Oman

June Goes

Saudi Arabia

Luz Sadsad
Emma Jane Treadwell

Tunisia

Eman Hosni

**Nursing Working
Committees:****1. Nursing Practice & Quality**

Chair: Hassan Zahreddine
Co-Chair: Rima Jammal

2. Nursing Research

Chair: Amal Mohamed
Co-Chair: Hussein Makkieh

3. Professional Development

Chair: Reggie Belkhedim
Co-Chair: Sheena Ewing

From Dream to Reality...A personal experience with EMBMT Nursing Group

By: Reggie Belkhedim



What I am about to share is reality that was a dream.

Realization of a dream is one of the most fascinating things that could happen to anybody. And this is a personal experience for me and Ms. Amal Mohammad on the unfolding of the EMBMT Nursing Group in the Middle East. It all started with a simple wish, a simple vision, a tiny spark from within. Everything sprouted in the year 2007 when the 1st BMT International Symposium was first held in Riyadh, Saudi Arabia. In preparation for this event, it was conceived by the Scientific Committee that representation of nurses from all over the Middle East should be considered. That idea generated in us so much enthusiasm and gave Amal and myself the inspiration to come up with the guidelines informing our own Nurse group within the EMBMT sphere of operations. Of course, we could not do it without serious consultations as we were at a lost on how and where to start. For this reason and after some serious searching, we finally found a great mentor from the person of Monica Fielder, President of the EBMT Nursing Group. To her we presented the idea of having BMT nurses from all these EMRO regions. Together with Amal, we drafted the first guidelines. We presented things to Ms. Fielder which to her delight found it impressive. Her encouragement and prodding gave us that vigor to continue with our journey in big stride. Amazingly and unexpectedly, our motivation had made things happen within a short span of time. The guideline was fully drafted in a little

more than one week and was sent for review with the EBMT Nursing Group.

It must be remembered that during that time when everything was in its conception, hardly anyone understood the value and relevance of forming this group because of its complexities and the difficulties that entailed it. It was an abstract matter...a vague dream.

Then there came the 1st Bone Marrow Transplant Symposium which was regarded as the 1st EMBMT International Symposium in the year 2007 in Saudi Arabia. The event was attended by representatives from many Middle East countries such as Lebanon, Jordan, Oman, Egypt and Saudi Arabia.

Ms. Monica Fielder was the guest representing the EBMT Nursing Group. Amusingly, one of the difficulties we faced in motivating the nurses was the lack of confidence in implementation of this nursing group. That has really hindered many to accept the idea. However, with all the support we received from the EBMT Nursing Group, the light was kept burning. Everyone was resilient holding on to the vision and objectives.

In late 2009, EMBMT Nursing Group in KFSHRC was born. With the encouragement and support from the EMBMT Scientific Committee and all other concerned colleagues, things happened like a dream come true. Today, we are very please as much as proud to say that EMBMT Nursing Group has established its own guidelines and directories, and receiving numerous applications for membership. This achievement will be highlighted in our next EMBMT Meeting. We will also hopefully have a forum within the EBMT, which will be announced in the next EBMT Newsletter, until such time everyone can have access to the EMBMT Nursing Group through a website.

As I mentioned in my previous missive, this event is like a book where pages keep unfolding before our eyes. It was a light that came from a tiny spark. And the challenge for us now is how to keep that light burning.

"Let whoever is in charge keep this simple question in her head - (not, how can I always do this right thing myself, but) how can I provide for the right thing to be always done?"

-- Florence Nightingale

