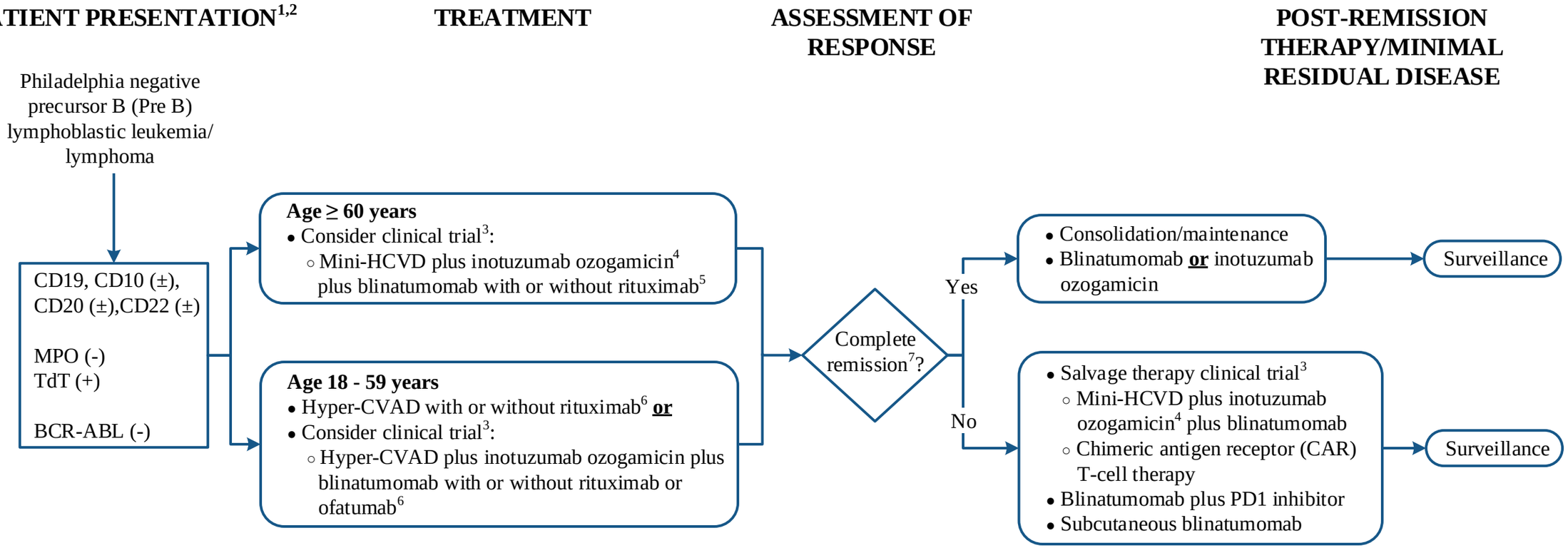
Acute Lymphoblastic Leukemia and Lymphoblastic Lymphoma (ALL) – Adult[1]

TABLE OF CONTENTS

[1] Age ≥ 18 years old

Acute Lymphoblastic Leukemia and Lymphoblastic Lymphoma (ALL) – Adult

Note: Consider clinical trials as treatment options for eligible patients. Stem Cell Transplant (SCT) guidelines are not included with this algorithm. Leukemia patients should be referred and treated at a Comprehensive Cancer Center.



[1] See Physical Activity, Nutrition, and Tobacco Cessation algorithms; ongoing reassessment of lifestyle risks should be a part of routine clinical practice
[2] Consider MD Anderson approved biomarkers
[3] See Leukemia Clinical Trials
[4] Mini-HCVD (cyclophosphamide and dexamethasone at 50% dose reduction, no anthracycline, methotrexate at 75% dose reduction, cytarabine at 0.5 g/m^2 for 4 doses) plus inotuzumab ozogamicin
[5] Rituximab if CD20 ≥ 20%
[6] Hyper-CVAD (hyper-fractionated cyclophosphamide, vincristine, doxorubicin, dexamethasone); rituximab if CD20 ≥ 20%
Hyper-CVAD (hyper-fractionated cyclophosphamide, vincristine, doxorubicin, dexamethasone); ofatumumab if CD20 ≥ 1%
[7] Failure after induction with hyper-CVAD based regimen means no response after 2 cycles of chemotherapy

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Approved by the Executive Committee of the Medical Staff on 02/23/2021

Acute Lymphoblastic Leukemia and Lymphoblastic Lymphoma (ALL) – Adult

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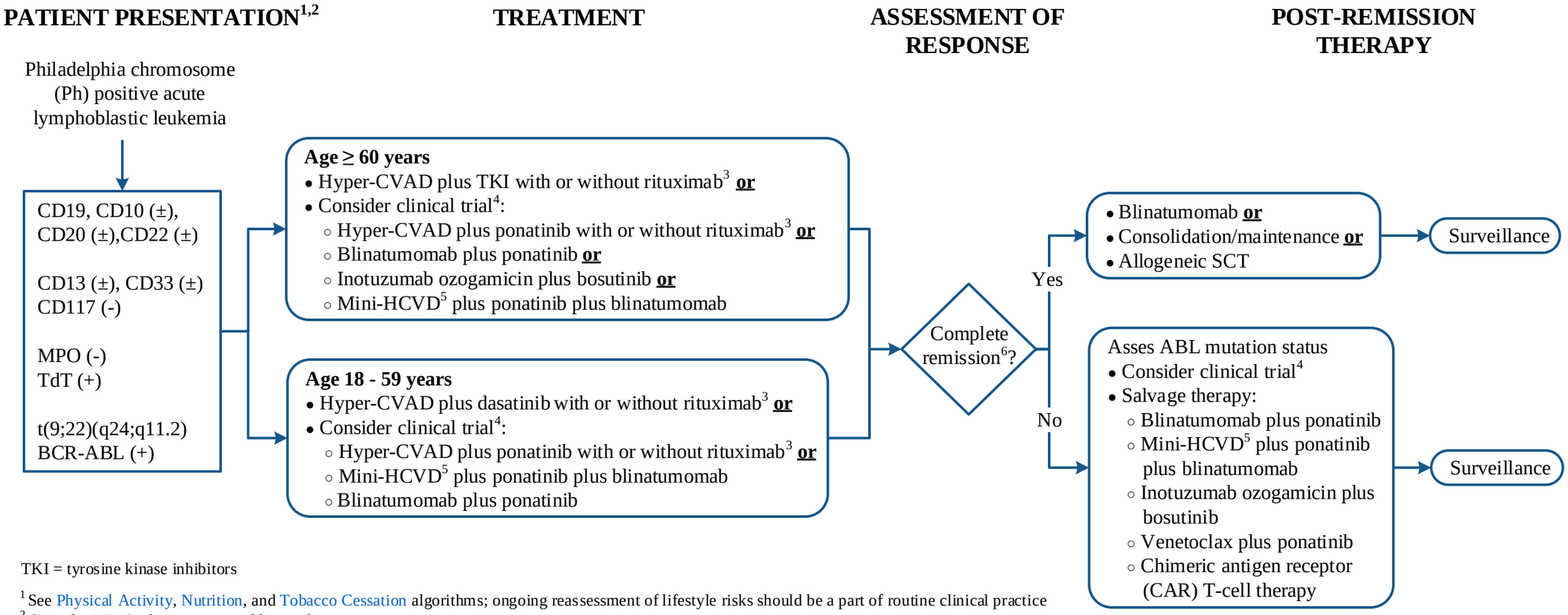

TKI = tyrosine kinase inhibitors

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Acute Lymphoblastic Leukemia and Lymphoblastic Lymphoma (ALL) – Adult

Disclaimer: *This algorithm has been developed for MD Anderson using a multidisciplinary approach considering circumstances particular to MD Anderson's specific patient population, services and structure, and clinical information. This is not intended to replace the independent medical or professional judgment of physicians or other health care providers in the context of individual clinical circumstances to determine a patient's care. This algorithm should not be used to treat pregnant women.*

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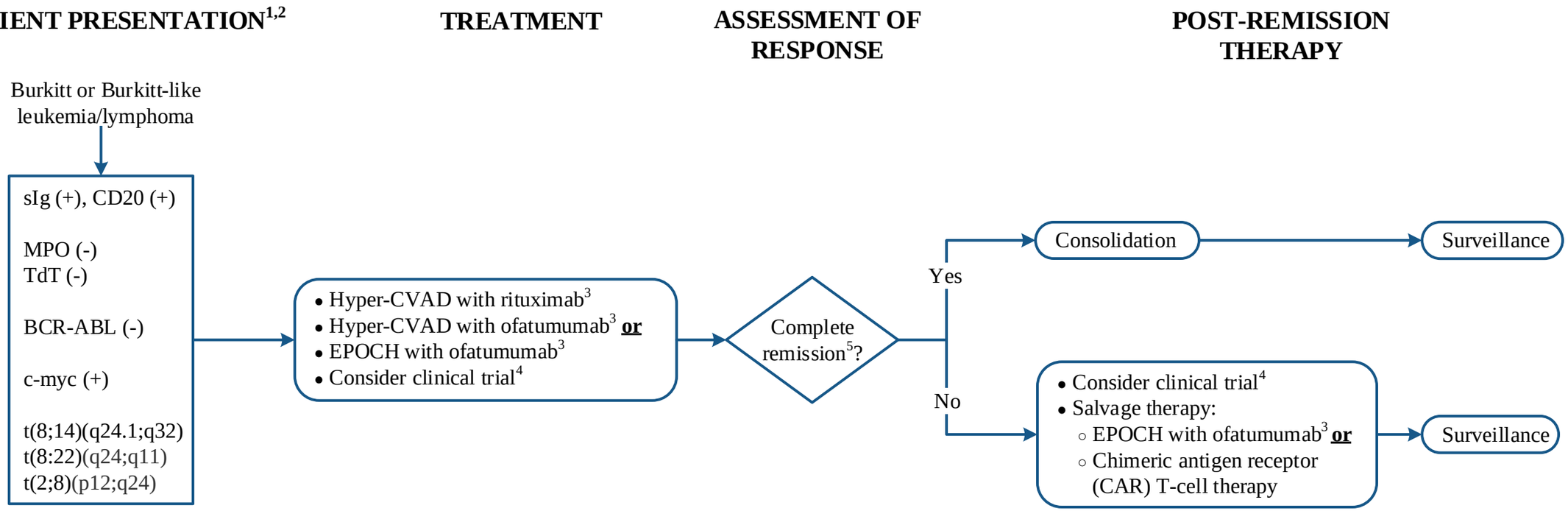
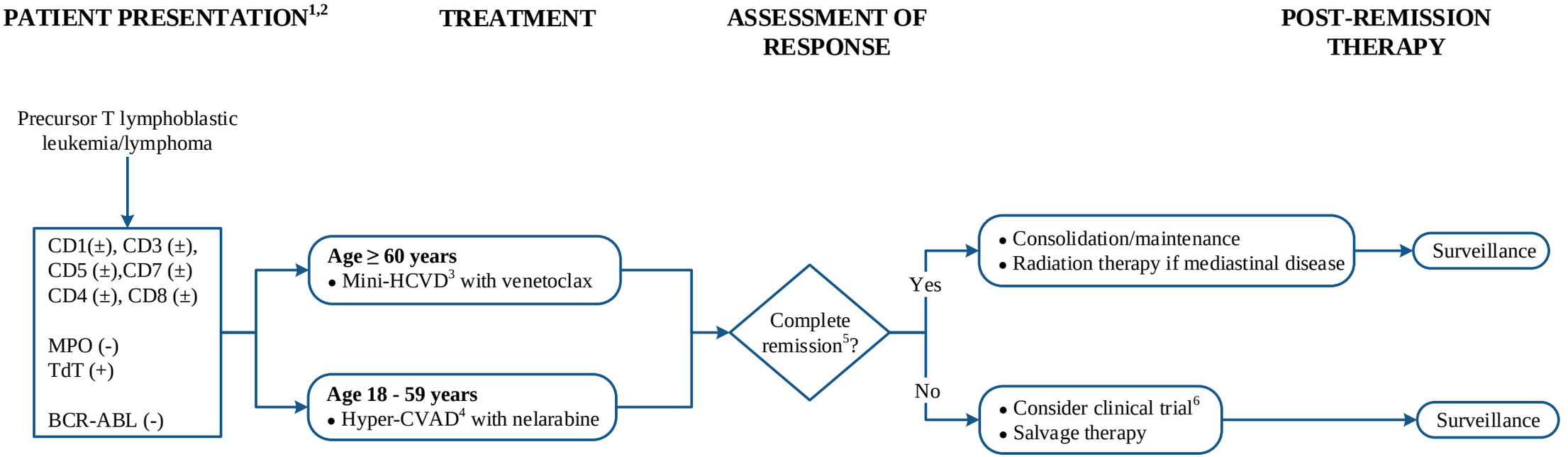


[1] See Physical Activity, Nutrition, and Tobacco Cessation algorithms; ongoing reassessment of lifestyle risks should be a part of routine clinical practice
[2] Consider MD Anderson approved biomarkers
[3] Hyper-CVAD (hyper-fractionated cyclophosphamide, vincristine, doxorubicin, dexamethasone) plus rituximab
Hyper-CVAD (hyper-fractionated cyclophosphamide, vincristine, doxorubicin, dexamethasone) plus ofatumumab
EPOCH (etoposide, prednisone, vincristine, cyclophosphamide, doxorubicin) plus ofatumumab
[4] See Leukemia Clinical Trials
[5] Failure after induction with hyper-CVAD based regimen means no response after 2 cycles of chemotherapy

Acute Lymphoblastic Leukemia and Lymphoblastic Lymphoma (ALL) – Adult

Note: Consider clinical trials as treatment options for eligible patients. Stem Cell Transplant (SCT) guidelines are not included with this algorithm. Leukemia patients should be referred and treated at a Comprehensive Cancer Center.



[1] See Physical Activity, Nutrition, and Tobacco Cessation algorithms; ongoing reassessment of lifestyle risks should be a part of routine clinical practice
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[6] See Leukemia Clinical Trials

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Continued on next page

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