

NHLBI-MDS

For Patients with Suspected MDS

NHLBI-MDS Available Through ECOG-ACRIN Cancer Research Group

The National Myelodysplastic Syndromes (MDS) Study

Recruiting patients with low blood counts undergoing a bone marrow assessment for evaluation of MDS

Patient Population

See Section 3.0 for Complete Eligibility Details

- Suspected (e.g., persistent unexplained cytopenia, circulating peripheral blasts etc.) MDS or MDS/MPN overlap disorders and undergoing diagnostic work-up with planned bone marrow assessments OR diagnosed with de novo or therapy-related MDS within 12 months of enrollment per WHO criteria and undergoing clinical evaluation and planned bone marrow assessments to confirm MDS or to evaluate disease status
- Bone marrow aspirate expected to be performed within I week of registration, and in all cases must be performed no later than 4 weeks after enrollment
- Age ≥ 18 years
- No prior treatment for MDS at entry and through the time of the entry bone marrow aspirate
- No treatment with hematopoietic grown factors in prior 6 months
- If anemic without prior MDS: B12, serum folate, MCV, RDW, ferritin, and iron studies tests performed within the prior 6 months
- No diagnosis of a solid tumor or hematologic malignancy within 2 years prior to enrollment except for in situ cancer of the skin (basal or squamous cell), cervix, bladder, breast, or prostate
- No treatment with radiation therapy in the 2 years prior to registration
- No non-hormonal treatment for malignancy within 2 years prior to registration
- No established hereditary bone marrow failure syndrome
- No known primary diagnosis of aplastic anemia, classical paroxysmal nocturnal hemoglobinuria, amegakaryocytic thrombocytopenic purpura, or large granular lymphocyte leukemia
- Not enrolled in the Connect MDS/AML Disease Registry
- Note: Alternative causes for cytopenias should be considered (see protocol for recommended tests)

Patient Plan

See Section 5.0 for Study Design Details

Baseline:

- Patient histories will be obtained and medical records will be reviewed to obtain past medical history, baseline laboratory tests, and diagnostic information (including pathology reports and treatment history)
- Bone marrow and peripheral blood slides will be centrally reviewed (patient is required to contribute for storage and provide eyebrow hairs and buccal swab)
- Based on central pathology review, a baseline classification will be made which will assign the participant into either Longitudinal cohort:
 - ♦ MDS; MDS/MPN overlap disorders
 - AML with < 30% blasts without core binding factor or acute promyelocytic leukemia (AML with < 30% blasts including chromosomal rearrangements between chromosomes 8 and 21 and within chromosome 16 as well as t(15;17))
 - ♦ ICUS
 - ♦ Or At Risk (dysplastic or select genetic markers), or
 - ♦ The Cross-sectional cohort (no longitudinal follow-up)

Follow-up:

- Sites will be notified via email, no later than the I2th month post-enrollment, if follow-up is required.; however, individuals not assigned to a group by month 6 should submit specimens and data associated with that visit
- <u>Cross-Sectional:</u> No post baseline biological samples/data will be collected
- <u>Longitudinal</u>: Will submit specimens and data associated at each follow-up visits (occurring every 6 months)
- Biologic samples are submitted at AML diagnosis
- Capture of biologic samples will be discontinued if the participant receives an HCT or following AML diagnosis
- Individuals may participate in other studies but will continue to submit data and specimens for this protocol

Refer to the Manual of Procedures (MOP) for additional details re: the procedures used for this study.

Mikkael Sekeres, M.D., M.S.

Study Chair:

Deputy Chair: Steven Gore, M.D.

Patient Enrollment

All Sites: Oncology Patient Enrollment Network (OPEN) https://open.ctsu.org

Protocol Information

ECOG-ACRIN Operations-Boston: 857-504-2900, http://ecog-acrin.org (Member Login)

Please Enroll Your Eligible Patients!

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Study Schema

· If biopsied 1 BM biopsy H&E stained, 1 unstained core section

Eligible Participants Undergoing Medically Indicated Bone Marrow Procedure · Suspected (eg, persistent unexplained cytopenias, circulating peripheral blasts) MDS or MDS/MPN overlap disorders Pathologic diagnosis of MDS within 12 months prior to enrollment and Untreated 1. Register for MDS study 5. Patient care 7. Site enters patient **Longitudinal Cohort** pathology care visit clinical data Participants with MDS, Patient care specimens diagnosis MDS/MPN overlap disorders, 2. Assign study collection kits AML cases with < 30% blasts without core binding factor or acute promyelocytic leukemia 8. MDS Study Assignment (including chromosomal 3. Patient care visit, samples Based on central pathology rearrangements between collected for diagnosis 6. CL/B prepares review, a baseline Research Specimens chromosomes 8 and 21 and and stores classification of clinical data · BM aspirate samples within chromosome 16 as well 4. Research sample kits slides and research slides sent · PB samples as t[15;17]) or ICUS or At Risk shipped to CL/B overnight from site · Germline samples (dysplastic or genetic markers)* Data and specimens collected every 6 mo; follow-up visits, Pathology—ship slides to CL/B: when aspirates performed Cross-sectional Cohort Whenever marrow aspirate is performed: and if participant progresses · 3 PB unstained, 1 W/G stain (optional) All others; no follow-up to AMI visits or specimen collection 3 BM aspirate unstained, 1 W/G (optional), 1 Prussian blue (optional)

*Cases with local or central pathology assessments of dysplasia in baseline bone marrow aspirate; select karyotype abnormalities; locally or centrally detected genetic mutations meeting minimally acceptable criteria for allelic variant presence.

AML = acute myeloid leukemia; BM = bone marrow; CL/B = central laboratory/biorepository; H&E = hematoxylin and eosin; ICUS = idiopathic cytopenia of undetermined significance; MDS = myelodysplastic syndrome; MPN = myeloproliferative neoplasm; PB = peripheral blood; W/G = Wright-Giemsa.

Planned enrollment: up to 3,500 participants





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