

VII. 研究班會議記錄

研究班会議記録

班会議：

第一回研究班会議

期日：2005年7月2日（土）午前10時～午後6時

会場：名古屋第一赤十字病院 古川講堂

第二回研究班会議

（一日目）

期日：2006年1月27日（金）午後1時～午後5時30分

会場：東京大学医科学研究所附属病院 8階会議室

（二日目）

期日：2006年1月28日（土）午前10時～12時30分

会場： 同 講堂

研究打合せ会：

組織適合性関連第一回研究打合せ会

期日：2005年7月2日（土）午後6時～午後8時

会場：名古屋第一赤十字病院 会議室

組織適合性関連第二回研究打合せ会

期日：2006年1月27日（金）午前10時～12時

会場：東京大学医科学研究所1号館2階 会議室

QOL 関連研究打合せ会

期日：2005年7月2日（土）12時10分～午後1時10分

会場：名古屋第一赤十字病院 会議室

VIII. 研究成果の刊行に関する一覧表

研究成果の刊行に関する一覧表

発表者氏名	論文タイトル名	発表誌名	巻名	ページ	出版年
Fukuno K., Tsurumi H., Yamada T., Oyama M., Matsuyama T., Terakura S., Koderu Y., Moriwaki H.	Case reports: Lymphoid blast crisis of chronic myelogenous leukemia occurring more than 11 years after receiving an allogeneic bone marrow transplant for chronic myelogenous leukemia in myeloid blast crisis at onset.	Bone Marrow Transplantation	31	211-213	2003
Suzuki R., Murata M., Kami M., Ohtake S., Asou N., Koderu Y., Tomonaga M., Masaki Y., Kusumoto S., Takeuchi J., Matsuda S., Hirai H., Yorimitsu S., Hamajima N., Seto M., Shimoyama M., Ohno R., Morishima Y., Nakamura S.	Prognostic significance of CD7 ⁺ CD56 ⁺ phenotype and chromosome 5 abnormalities for acute myeloid leukemia M0.	International Journal of Hematology	77	482-489	2003
Akatsuka Y., Nishida T., Kondo E., Miyazaki M., Taji H., Iida H., Tsujimura K., Yazaki M., Naoe T., Morishima Y., Koderu Y., Kuzushima K., Takahashi T.	Identification of a polymorphic gene, BCL2A1, encoding two novel hematopoietic lineage-specific minor histocompatibility antigens.	The Rockefeller University Press	197 (11)	1489-1500	2003
Kanda Y., Chiba S., Hirai H., Sakamaki H., Iseki T., Koderu Y., Karasuno T., Okamoto S., Hirabayashi N., Iwato K., Maruta A., Fujimori Y., Furukawa T., Mineishi S., Matsuo K., Hamajima N., Imamura M.	Allogeneic hematopoietic stem cell transplantation from family members other than HLA-identical siblings over the last decade (1991-2000).	BLOOD	102 (4)	1541-1547	2003
Kondo E., Akatsuka Y., Kuzushima K., Tsujimura K., Asakura S., Tajima K., Kagami Y., Koderu Y., Tanimoto M., Morishima Y., Takahashi T.	Identification of novel CTL epitopes of HLA CMV-pp65 presented by a variety of HLA alleles.	BLOOD	103 (2)	630-638	2004

発表者氏名	論文タイトル名	発表誌名	巻名	ページ	出版年
Lida H., Sao H., Kitaori K., Gotoh S., Yazaki M., Kojima S., Wakita A., Morishima Y., <u>Kodera Y.</u> , Morishita Y.	Twenty years' experience in allogeneic hematopoietic stem cell transplantation for Philadelphia chromosome-positive acute lymphoblastic leukemia in the Nagoya Blood and Marrow Transplantation Group.	International Journal of Hematology	79	79-84	2004
Nishida T., Akatsuka Y., Morishima Y., Hamajima N., Tsujimura K., Kuzushima K., <u>Kodera Y.</u> , Takahashi T.	Clinical relevance of a newly identified HLA-A24-restricted minor histocompatibility antigen epitope derived from BCL2A1,ACC-1 in patients receiving HLA genotypically matched unrelated bone marrow transplant.	British Journal of Haematology	124	629-635	2004
Ozeki K., Kiyoi H., Hirose Y., Iwai M., Ninomiya M., <u>Kodera Y.</u> , Miyawaki S., Kuriyama K., Shimazaki C., Akiyama H., Nishimura M., Motoji T., Shinagawa K., Takeshita A., Ueda R., Ohno R., Emi N., Naoe T.	Biologic and clinical significance of the FLT3 transcript level in acute myeloid leukemia.	BLOOD	103 (5)	1901-1908	2004
Izutsu K., Kanda Y., Ohno H., Sao H., Ogawa H., Miyazaki Y., Kawa K., <u>Kodera Y.</u> , Kato S., Morishima Y., Hirai H.	Unrelated bone marrow transplantation for non-Hodgkin lymphoma: a study from the Japan Marrow Donor Program.	BLOOD	103 (5)	1955-1960	2004
Kanda Y., Izutsu K., Hirai H., Sakamaki H., Iseki T., <u>Kodera Y.</u> , Okamoto S., Mitsui H., Iwato K., Hirabayashi N., Furukawa T., Maruta A., Kasai M., Atsuta Y., Hamajima N., Hiraoka A., Kawa K.	Effect of graft-versus-host disease on the outcome of bone marrow transplantation from an HLA-identical sibling donor using GVHD prophylaxis with cyclosporin A and methotrexate.	Leukemia	18	1013-1019	2004

発表者氏名	論文タイトル名	発表誌名	巻名	ページ	出版年
Nishida T., Hamaguchi M., Hirabayashi M., Haneda M., Terakura S., Atsuta Y., Imagama S., Kanie T., Murata M., Taji H., Suzuki R., Morishita Y., Kodera Y.	Intestinal thrombotic microangiopathy after allogeneic bone marrow transplantation: a clinical imitator of acute enteric graft-versus-host disease.	Bone Marrow Transplantation	33	1143-1150	2004
Ogawa H., Ikegame K., Kawakami M., Takahashi S., Sakamaki H., Karasuno T., Sao H., <u>Kodera Y.</u> , Hirabayashi N., Okamoto S., Harada M., Iwato K., Maruta A., Tanimoto M., Kawa K. on behalf of the Japan Society for Hematopoietic Cell Transplantation	Impact of cytogenetics on outcome of stem cell transplantation for acute myeloid leukemia in first remission: a large-scale retrospective analysis of data from the Japan Society for Hematopoietic Cell Transplantation.	International Journal of Hematology	79	495-500	2004
Sakata N., Kawa K., Kato K., Yabe H., Yabe M., Nagasawa M., Mugishima H., Kigawsawa H., Tsuchida M., Akiyama Y., Morishima Y., <u>Kodera Y.</u> , Kato S.	Unrelated donor marrow transplantation for congenital immunodeficiency and metabolic disease: an update of the experience of the Japan Marrow Donor Program.	International Journal of Hematology	80	174-182	2004
Yamamori I., Kanei T., Maeda N., <u>Kodera Y.</u> , Matsuyama T. and Hasegawa H.	Appearance of thyroid stimulating and blocking immunoglobulins after bone marrow transplantation: presentation of two contrasting cases.	Endocrine Journal	51 (4)	439-443	2004
Ichinohe T., Uchiyama T., Shimazaki C., Matsuo K., Tamaki S., Hino M., Watanabe A., Hamaguchi M., Adachi S., Gondo H., Uoshima N., Yoshihara T., Hatanaka K., Fujii H., Kawa K., Kawanishi K., Oka K., Kimura H., Itoh M., Inukai T., Maruya E., Saji H., and <u>Kodera Y.</u> , for the Japanese Collaborative Study Group for NIMA-Complementary Haploidentical Stem Cell Transplantation.	Feasibility of HLA-haploidentical hematopoietic stem cell transplantation between noninherited maternal antigen (NIMA)-mismatched family members linked with long-term fetomaternal microchimerism.	BLOOD	104 (12)	3821-3828	2004

発表者氏名	論文タイトル名	発表誌名	巻名	ページ	出版年
Torikai H., Akatsuka Y., Miyazaki M., Warren EH III, Oba T., Tsujimura K., Motoyoshi K., Morishima Y., Kodera Y., Kuzushima K., and Takahashi T.	A novel HLA-A*3303-restricted minor histocompatibility antigen encoded by an unconventional open reading frame of human TMSB4Y gene ¹ .	The Journal of Immunology	173 (11)	7046-7054	2004
Kondo E., Akatsuka Y., Nawa A., Kuzushima K., Tsujimura K., Tanimoto M., Kodera Y., Morishima Y., Kuzuya K., and Takahashi T.	Retroviral vector backbone immunogenicity: identification of cytotoxic T-cell epitopes in retroviral vector-packaging sequences.	Gene Therapy	12	252-258	2005
Nakai K., Kanda Y., Fukuhara S., Sakamaki H., Okamoto S., Kodera Y., Tanosaki R., Matsushima T., Atsuta Y., Hamajima N., Kasai M. and Kato S.	Value of chemotherapy before allogeneic hematopoietic stem cell transplantation from an HLA-identical sibling donor for myelodysplastic syndrome.	Leukemia	19	396-401	2005

IX. 資料

Severe Adverse Events of Allogeneic Related Peripheral Blood Stem Cell Donors –Results of Nation-Wide 3,262 Consecutively and Prospectively Registered Case-Survey in Japan and of Its Comparison to the Outcome of Retrospective Survey Shared with EBMT for Stem Cell Donors. Yoshihisa Kodera*,¹ Shunichi Kato*,¹ Mine Harada,¹ Shintaro Shiobara*,¹ Nobuyuki Hamajima*,¹ Yasuo Morishima,¹ Mitsune Tanimoto,¹ Shigetaka Asano*,¹ Yasuo Ikeda,¹ Hiroo Dohi*,¹ Tatsutoshi Nakahata*,¹ Masahiro Imamura,¹ Keisei Kawa*,¹ Yoichi Takaue,¹ Yoshinobu Kanda*,¹ Kazuhito Yamamoto*,¹ Genevieve Favre*,² Alois Gratwohl.² ¹The Japan Society for Hematopoietic Cell Transplantation, Japanese Red Cross Nagoya First Hospital, Nagoya, Japan; ²European Group of Blood and Marrow Transplantation, Switzerland.

In April 2000, we created a system, which was cooperatively steered by The Japan Society for Hematopoietic Cell Transplantation (JSHCT) and G-CSF producing and/or selling companies, to catch up the types and the frequencies of acute and late severe adverse events (SAE) of peripheral blood stem cell (PBSC) donors among relatives in Japan. Every PBSC donor was registered to JSHCT and was given unique donor number before the PBSC donation. Every harvest center was mandatory required to observe the JSHCT Guideline for donor's criteria and to submit the day 30 report as well as the immediate report of any severe SAE, and also to ask donors' receiving annual health check for 5 years. This time, we report the acute SAE observed among 3,262 consecutive donors in 233 institutes and the late SAE reported through annual health check by the forth year of post PBSC harvest among 1,370 donors (2,849 times) who agreed with this work of the society. As of March 2005, 50 acute SAE out of 3,262 cases (1.5%) were reported, including anginal attack, vein thrombosis, retroperitoneal hematoma, subarachnoid hemorrhage, interstitial pneumonitis and others. Twenty-eight (2.0%) of late SAE were reported from 1,370 cases, including 1 hematological malignancy (acute myelogenous leukemia), 8 other malignancies and others. To compare these acute and late SAE of PBSC donors to those of bone marrow (BM) donors, the questionnaires, a part of which was shared with The European Group of Blood and Marrow Transplantation (EBMT) were sent to 286 institutes of JSHCT and 191 institutes (67%) answered about 5,921 cases of bone marrow harvest from relatives and the comparative results were as followings: PBSC donors: BM donors, per 10,000; Death within 30 days = 0:1.7, SAE within 30days of post-harvest=153.0:35.5 (Definite SAE=21.5:6.8), Hematological malignancy at anytime of post donation = 3.1:2.9. On the other hand, the results obtained by EBMT, where the both surveys were retrospective, were as followings (PBSC donors: BM donors, per 10,000); Death within 30 days = 1.83:0.22, SAE within 30 days = 9.7:2.7, Hematological malignancy at anytime of post-donation =3.0:2.0. These results showed the followings; 1) the acute SAE might occur more frequently at PBSC donors, 2) the different frequency of acute SAE and of the mortality within 30 days of post-donation at PBSC donors between JSHCT side and EBMT side might reflect the difference of donor survey system; pre-registration with guideline for donor's eligibility vs. retrospective survey, 3) the frequency of the occurrence of hematological malignancy was not necessarily high at PBSC donors. Although the case numbers studied at PBSC donors and BM donors in JSHCT and EBMT were different each other, no death within 30days was reported among PBSC donors of JSHCT so far and it might come from the pre-registration system of donors which made the surveillance for the safety of every donor possible and is recommended for both PBSC and BM donors at an international level in order to improve donor safety.

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