

## Impact of the ICAL on the treatment of acute leukemia

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### Abstract

The International Consortium on Acute Promyelocytic Leukemia (IC-APL) is an initiative of the International Members Committee of the American Society of Hematology, created in the spirit of international clinical and laboratory collaboration with the aim of reducing the difference in the outcomes of patients with APL treated in developed and developing countries. It congregates leaders of well-established cooperative groups in Europe and North America, and hematologists in Brazil, Chile, Peru, Uruguay, and Paraguay. APL was initially selected as a model disease to test the impact of networking on outcomes because it is a highly curable disease if early diagnosis and specific treatment are promptly established. The network includes more than 20 hospitals with 5 national coordinators and reference laboratories, common clinical record forms, and laboratory and data management training programs. To orchestrate clinical, laboratorial, and educational activities, 5 subcommittees were created: Treatment Guidelines; Drug Availability; Laboratory and Diagnostic Guidelines; Web Registration and Auditing; and Funding Subcommittee. As treatment, the consortium adopted the combination of all-*trans* retinoic acid and anthracycline, using the same design of the PETHEMA/HOVON LPA2005 protocol, except that idarubicin was replaced by daunorubicin. Compared with historical controls, networking increased the overall survival from ~50% to 80% and reduced the induction mortality rate by half. The outcomes of patients enrolled in the IC-APL were similar to those observed in developed countries, including the twin protocol conducted in Europe. Based on the improvement observed in the outcome of patients with APL, the Consortium expanded its activities to projects involving patients with acute myeloid leukemia categorized as favorable or intermediate risk according to the European LeukemiaNet proposal. To reflect this change, the cooperative group is now called the International Consortium on Acute Leukemias (ICAL) and is planning to expand its activities to regions other than Latin America.

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Contribution: E.M.R. wrote this manuscript on behalf of the International Consortium on Acute Leukemias, whose Steering Committee consists of the following members: Nancy Berliner, Richard Dillon, Evandro Fagundes, Arnold Ganser, Armand Keating, Haesook Kim, Francesco Lo Coco, Bob Lowenberg, Ana Ayala-Lugo, Pablo Muxi, Juan Navarro, Ricardo Pasquini, Raul Ribeiro, Miguel Sanz, Stanley Schrier, Martin Tallman, Maria Soledad Unduraga, Peter Valk, and Jose Zarza. All members of the Committee have read, edited, and approved the manuscript.

Conflict-of-interest disclosure: E.M.R. has participated in speaker's bureaus of the following companies: TEVA, Novartis, and Janssen. He has not received research funding nor acted as a consultant for any company, and has no owner equity and receives no royalties from any entity.

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