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Hematopoietic Stem Cell Transplantation (HSCT) in childhood leukemia

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The rate of HSCTs done in children has significantly increased. HSCT could be the only cure for children who are refractory for initial chemotherapy. The indication and sources of transplant Cord Blood (CB), Bone Marrow (BM), Peripheral Blood Stem Cells (PBSC), and haploidentical in leukemic patients have to be modified and re-evaluated at different stages of the management. With proper weighing risk and benefits, many rapid advances and developments took place to improve the outcome of HSCT in childhood leukemia. The close collaboration between chemotherapy SCT groups offers the chance to identify and adjust. The indication for allo-SCT according to the chemotherapy results show the optimal time point of SCT and provides new strategies for poor risk groups.

Biography

Al-Jawhara Al-Manea is working as a Consultant Paediatric Hematology and Oncology and Bone Marrow Transplant in King Fahad Military Hospital, Jeddah. She is also serving as a Chair of Paediatric Hematology and Oncology Division. She is certified by Arab & Saudi board of General Paediatric and was Certified Fellowship Paediatric Haematology and Oncology by University de Montreal Canada in 2009. In 2011 she was also Certified Fellowship Paediatric Bone Marrow transplant in University of Toronto Canada. Aljawhara is Active Member of American Society Paediatric HO, American Society Bone Marrow Transplant, Canadian Society of Bone Marrow Transplant, European Hematology Association & Saudi society of Paediatric Hematology and Oncology. She has also presented abstracts in paediatric hematology meetings and has been serving as a reviewer.

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