

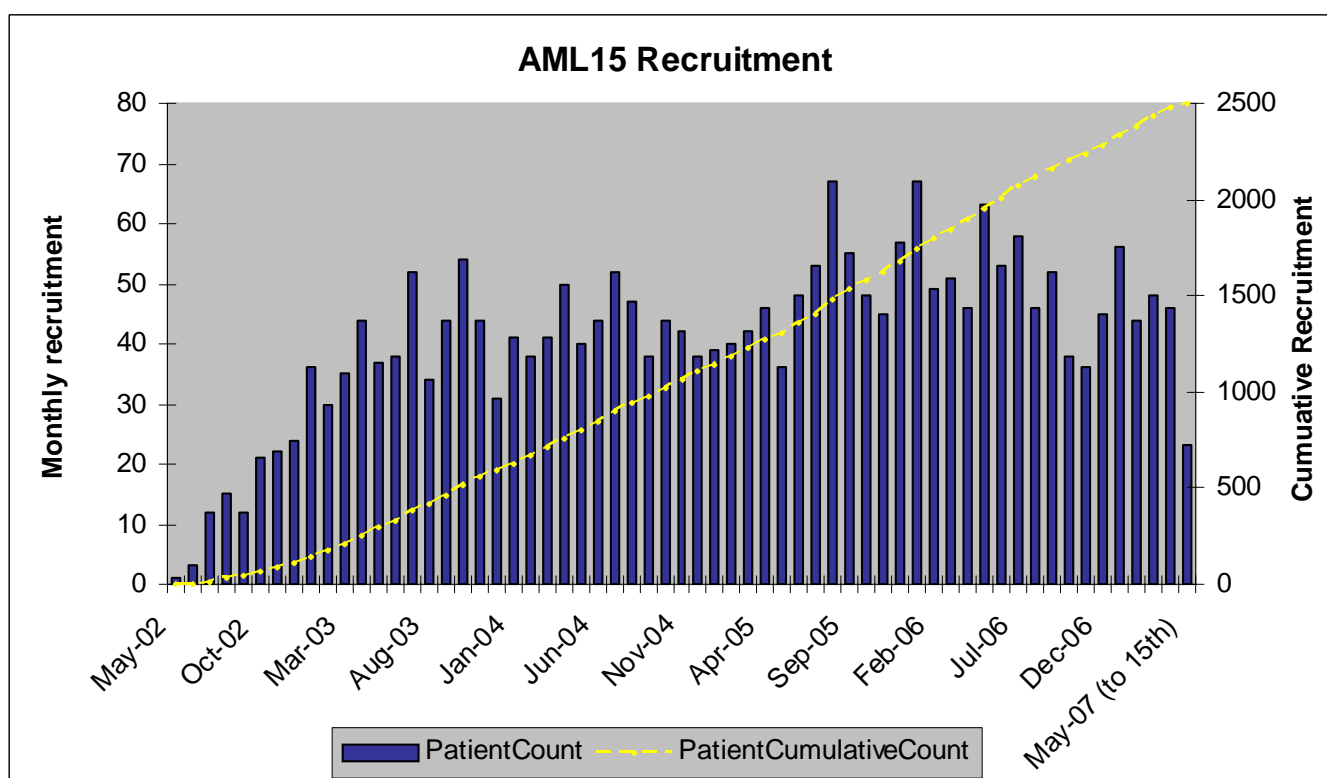


AML15 Trial Newsletter

May 2007

AML15 Reaches Recruitment Target! Recruitment will continue until AML17 starts

We would like to say a very big thank you to all of the AML15 collaborators who have ensured that AML15 has reached its recruitment target of 2500 patients in exactly 5 years. This is a fantastic achievement! **Please note that AML15 will continue to recruit patients until AML17 starts which will hopefully be later this year.**



The 2500th patient

Recruited by Dr Byrne at Nottingham City Hospital, congratulations!

The top recruiting centres

Manchester Royal Infirmary: **95** patients; University Hospital of Wales, Cardiff: **88** patients; Rigshospitalet, Denmark: **84** patients; Christie Hospital Manchester: **71** patients; and Nottingham City Hospital: **69** patients.

All AML15 collaborators

We thank all staff and patients at the 176 centres across the UK, Denmark, Netherlands, New Zealand, Australia and South Africa for participating in AML15 and for making the trial the success it is.

AML15 Closure of the FLAG-Ida Arm

As you are aware the FLAG-Ida arm of AML15 closed on Tuesday 8th May 2007.

The non-APL induction randomisation for **adults** is ADE v DA.

Paediatric patients can be registered at diagnosis, before induction chemotherapy commences, so that they can continue to take part in the 2nd and 3rd AML15 randomisations.

Please register paediatric patients in the same way as you have previously randomised paediatric patients by either phoning the BCTU randomisation service 0800 953 0274 or using the online system;

<https://www.trials.bham.ac.uk/AML15>.

Collaborators registering paediatric patients will also need to answer all of the eligibility questions, as previously. Paediatric registrations **must** take place at diagnosis before induction chemotherapy has commenced – later registration will not be permitted.

The amended protocol, information sheets and consent forms will be available in due course

Professor Burnett has asked that all AML15 collaborators take care that the patient understands that they will not be able to enter the FLAG-Ida option.

Apart from the closure of the FLAG-Ida arm, all other AML15 randomisations remain the same.

Reason for Closure of the FLAG-Ida Arm

We have had queries from a number of collaborators asking the reason for the FLAG-Ida closure.

The FLAG-Ida arm has been closed since the target number of patients has been accrued. The Trial Steering Committee is aware that FLAG-Ida leads to more prolonged myelosuppression, and hence greater supportive care requirements, than ADE and DA, so the decision was made not to continue the FLAG-Ida arm beyond its target accrual.

The AML Trials Team are always here to help. Please find our contact details listed below.

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