

# ONKOLOGIE

• International Journal for Cancer Research and Treatment

Supplement 2  
zu Band 17  
Oktober 1994

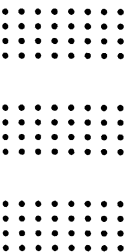
---

Gemeinsame Jahrestagung der  
**Deutschen und der  
Österreichischen Gesellschaft  
für Hämatologie und Onkologie**

Wien, 9.-12. Oktober 1994

---

**Abstracts**



---

# Gemeinsame Jahrestagung der Deutschen und der Österreichischen Gesellschaft für Hämatologie und Onkologie

Wien, 9.-12. Oktober 1994

---

## Abstracts

---

### Contents

III	Leitung und Organisation
V-XV	Author Index
XVII-XXVI	Subject Index
1-172	Abstracts No. 1-686

**KARGER**

---

**HIGH SERUM LEVELS OF sCD23 AND sCD25 IN EARLY STAGE B-CLL CORRELATE WITH CLINICAL CHARACTERISTICS PREDICTIVE FOR PROGRESSIVE DISEASE**

W.U.Knauf, B.Zeigmeister, I.Langenmaier\*, B.Ehlers, A.Raghavachar, and E.Thiel. Abt.Hämatologie und Onkologie, Klinikum Steglitz, Freie Universität, 12200 Berlin, und \*Abt.Hämatologie und Onkologie, Klinikum Innenstadt der Universität, 80336 München

Serum levels of the soluble forms of CD23 and CD25 (sCD23/sCD25) are found to increase with advancing stages of disease in B-cell chronic lymphocytic leukemia (B-CLL). Therefore, these serum factors are thought to indicate disease activity and may be suitable in monitoring the patients (pts). In order to assess their suspected role as predictive factors for disease progression we analyzed sCD23 and sCD25 in early stage B-CLL with respect to other well known risk factors such as diffuse bone marrow (BM) infiltration, lymphocyte doubling time (LDT) <12 months, and elevated (>5U/l) serum thymidin kinase (TK). So far, 60 pts with Binet stage A B-CLL were studied. Patterns of BM infiltration, LDT, and serum TK were analyzed. Additional serum samples were obtained on ice, frozen immediately, and stored in liquid nitrogen until further processing. Then, levels of sCD23 and sCD25 were determined by means of ELISA kits (Cell Free, T-Cell Science, USA). A diffuse BM infiltration was found in 35 pts, a LDT <12 months was evident in 29 pts, and serum TK was >5U/l in 36 pts. The levels of sCD23 as well as of sCD25 were found to be higher in pts with a diffuse BM infiltration than in pts with nodular BM involvement ( $p<0.05$ ). Also, a LDT <12 months was associated with higher levels of sCD23 ( $p<0.05$ ) and sCD25 ( $p<0.01$ ). Furthermore, high levels of sCD23 correlated with high levels of serum TK ( $p<0.01$ ), whereas sCD25 did not. In summary, pts with early stage B-CLL at high risk for progression display higher levels of sCD23 and sCD25 than low risk pts. In particular, sCD23 correlates strongly with already established indicators for progressive disease. Therefore, sCD23 could act themselves as an independent risk factor and may contribute to the decision on risk adapted treatment strategies. Currently, the clinical course of pts with high as well as low levels of sCD23 is analyzed to examine the prognostic usefulness of sCD23 in B-CLL.