

Publication

European guidelines for antifungal management in leukemia and hematopoietic stem cell transplant recipients : summary of the ECIL 3–2009 update

JournalArticle (Originalarbeit in einer wissenschaftlichen Zeitschrift)**ID** 1196402**Author(s)** Maertens, J; Marchetti, O; Herbrecht, R; Cornely, O A; Flückiger, U; Frère, P; Gachot, B; Heinz, W J; Lass-Flörl, C; Ribaud, P; Thiebaut, A; Cordonnier, C; Third European Conference on Infections in Leukemia**Author(s) at UniBasel** [Flückiger, Ursula M.](#) ;**Year** 2011**Title** European guidelines for antifungal management in leukemia and hematopoietic stem cell transplant recipients : summary of the ECIL 3–2009 update**Journal** Bone marrow transplantation**Volume** 46**Number** 5**Pages / Article-Number** 709-18**Keywords** antifungals, neutropenia, leukemia, SCT, Candida, Aspergillus

In 2005, several groups, including the European Group for Blood and Marrow Transplantation, the European Organization for Treatment and Research of Cancer, the European Leukemia Net and the Immunocompromised Host Society created the European Conference on Infections in Leukemia (ECIL). The main goal of ECIL is to elaborate guidelines, or recommendations, for the management of infections in leukemia and stem cell transplant patients. The first sets of ECIL slides about the management of invasive fungal disease were made available on the web in 2006 and the papers were published in 2007. The third meeting of the group (ECIL 3) was held in September 2009 and the group updated its previous recommendations. The goal of this paper is to summarize the new proposals from ECIL 3, based on the results of studies published after the ECIL 2 meeting: (1) the prophylactic recommendations for hematopoietic stem cell transplant recipients were formulated differently, by splitting the neutropenic and the GVHD phases and taking into account recent data on voriconazole; (2) micafungin was introduced as an alternative drug for empirical antifungal therapy; (3) although several studies were published on preemptive antifungal approaches in neutropenic patients, the group decided not to propose any recommendation, as the only randomized study comparing an empirical versus a preemptive approach showed a significant excess of fungal disease in the preemptive group.

Publisher Nature Publishing Group**ISSN/ISBN** 0268-3369**edoc-URL** <http://edoc.unibas.ch/dok/A6006573>**Full Text on edoc** No;**Digital Object Identifier DOI** 10.1038/bmt.2010.175**PubMed ID** <http://www.ncbi.nlm.nih.gov/pubmed/20661235>**ISI-Number** WOS:000290472500011**Document type (ISI)** Journal Article