

Another study has shown that patients with de novo AMKL in the absence of DS have a more than 70% probability of achieving remission with regimens containing dose intensive ara-C, but they have a very high rate of relapse if therapy after remission consists only of intensive chemotherapy. Thus, allogeneic HSCT should be considered for patients who enter remission.

REFERENCES

1. Tallman MS, Neuberg D, Bennett JM, Francois CJ, Paietta E, Wiernik PH, et al. Acute megakaryocytic leukaemia: The Eastern Cooperative Oncology Group experience. *Blood*. 2000;96(7):2405–11.
2. WHO Classification of Tumours of Haematopoietic and Lymphoid Tissues (Medicine) 4th Edition by S. Swerdlow, E. Campo, N. L. Harris, E. S. Jaffe, S. A. Pileri, H. Stein, J. Thiele, D. Arber, R. Hasserjian, M. Le Beau
3. Faramarz Naeim, P. Nagesh Rao, Sophie X. Song, Wayne W. Grody, 21 - Acute Myeloid Leukemia, Not Otherwise Specified, Editor(s): Faramarz Naeim, P. Nagesh Rao, Sophie X. Song, Wayne W. Grody, Atlas of Hematopathology, Academic Press, 2013, Pages 259-281.
4. Tallman MS, Neuberg D, Cotelingam JD, et al. Acute megakaryocytic leukaemia: The Eastern Cooperative Oncology Group experience. *Blood* 2000;65:5-13
5. Hitzler, JK 2007 Acute megakaryoblastic leukaemia in Down syndrome. *Paediatric blood and cancer* 49(7 suppl): 1066-9).
6. Hama A, Yagasaki H, Takahashi Y, et al. Acute megakaryoblastic leukemia in children: a comparison of AMKL with or without Down syndrome 2008; *Br. J. Haematol.* 140(5): 552-61.
7. Biology and outcome of childhood acute megakaryoblastic leukemia: a single institution's experience Uma H. Athale, Bassem I. Razzouk, Susana C. Raimondi, Xin Tong, Frederick G. Behm, David R. Head, Deo K. Srivastava, Jeffrey E. Rubnitz, Laura Bowman, Ching-Hon Pui, and Raul C. Ribeiro 3727-3732