

Autologous Hematopoietic Stem Cell Transplantation for Systemic Sclerosis in Canada

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Autologous hematopoietic stem cell transplant (AH-SCT) has become an acceptable treatment option for systemic sclerosis (SSc). Two recently published trials, ASTIS and SCOT, have shown improved survival, more skin softening and improved pulmonary function after AH-SCT compared to immunosuppressive therapy.

Canadian and Australian scleroderma experts have developed a new set of inclusion/exclusion criteria that can act as a guide to help Canadian rheumatologists decide if a patient may be a good candidate for transplant. These criteria are included on the Canadian Scleroderma Research Group (CSRG) website at (canadiansclerodermaresearchgroup.org/stem-cell-transplantation-criteria). Most of the criteria are based on the results of a large Delphi survey of SSc experts around the world. The cardiac exclusion criteria are based on the opinions of a smaller number of experts and should be considered interim recommendations until a larger number of cardiologists are surveyed.

Our suggestion is that patients being considered for transplant should be assessed by a rheumatologist with

specific expertise in the care of SSc. These physicians will also record patient-related data in the Canadian Scleroderma Research Group database and thus facilitate research in the outcomes of transplant. A list of these physicians is also included via the CSRG link (canadiansclerodermaresearchgroup.org/stem-cell-transplantation-criteria).

Currently, not all transplant centers in Canada are performing these transplants. The three major sites are listed but it may be possible that other sites closer to the homes of the patients may also have the capability of doing the transplant. The decision to perform a transplant at an unlisted site should be made after a consultation between a rheumatologist with expertise in SSc and the transplant hematologist.

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