UNDERSTANDING VENO-OCCLUSIVE DISEASE (VOD)

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Hepatic veno-occlusive disease (VOD), also known as sinusoidal obstruction syndrome (SOS), is a potentially devastating complication that can occur following hematopoietic stem-cell transplant (HSCT).[1] In up to half of all cases, VOD progresses to VOD with multi-organ dysfunction (VOD with MOD), which has been shown to be deadly in 84% of patients.[1,2]

MOD = renal or pulmonary dysfunction

V

Vigilance

over patients at risk for VOD

INCIDENCE & RISKS[3-7]

Occurs in approximately **9–14%** of HSCT patients[1,3]

Patient-related
- Age
- Preexisting hepatic disturbance or dysfunction
  - Liver fibrosis
  - Previous liver disease
  - Elevated pre-HSCT AST/ALT
- Hepatotoxic medication

Transplant-related
- Allogeneic transplant
- HLA mismatch
- Previous myeloablative HSCT
- High-intensity conditioning regimens
  - Oral busulfan
  - Busulfan, in combination with cyclophosphamide
- Total body irradiation (high or single dose)

O

Observation

for signs and symptoms of VOD progression

SIGNS & SYMPTOMS[8,9]

- Right upper quadrant pain/hepatomegaly
- Weight gain
- Elevated bilirubin (BILIRUBIN)

First 21 days
signs and symptoms emerge

Monitor starting at Day 0 following HSCT for signs and symptoms of VOD, such as:[2-4,9]

- Weight gain
- Fluid retention
- Edema and ascites
- Hepatomegaly
- Jaundice
- Abdominal discomfort

D

Detection/Diagnosis

of VOD progression as soon as possible

IMPACT

VOD → Progresses in ~30 - 50% of cases[2] → VOD with MOD → 84% of VOD with MOD cases[1] → FATAL

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