

As for WBC number, DFS is 6 months for WBC>30,000/ $\mu$ L and 12 months for WBC <30,000/ $\mu$ L (p=0.07). Finally we can say that these two factors mentioned above are really important prognostic factors for this malignancy.

**Key words** : acute lymphoid leukemia, incidence, retrospective study, prognosis

## *The Registers of chronic diseases in Albania*

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The most frequent diseases, which started to massively affect the health of Albanians during the end of 20<sup>th</sup> century and that now, in the new century, are the major threat to public health, have been traditionally called “chronic diseases” or even “degenerative diseases”.

These terms had their limits in describing the group of diseases of interest here, with tuberculosi, syphilis or AIDS showing a “chronic” development, while heart attack or stroke

being “acute” manifestations of the blood circulation diseases. Furthermore, the term “degenerative disease” is too broad and misleading, with its underlying conotation of the unstopable process of human body getting old and frail.

“Non infective diseases” (NCD) is the term most widely accepted as the appropriate name for the group of diseases which dont get typically trasmitted by means of direct contact or by various vectors. It is not the ideal term for diseases which have a infective agent at the basis of their pathogenesis, such as rheumatismal heart disease or cancer of cervix, but it is generally efective for describing together in a category, from a public health point of view, health problems such as ischemic heart diseases, hypertension, cerebrovascular diseases, tumors, diabetes, chronic obstructive lung diseases etc. Although, these diseases have important specifics and diferences among them, their control strategies, or the organisation of an health system for them have a lot in common.

The monitoring process or the survveillance of NCDs is the systematic and continous collection of data and their analyses for providing the due insight on their time and space distribution, their health impact and burden in society, as well as their risk factors and socio economic determinats.

NCD monitoring also provide information on health system capacities and efectiveness in facing them. NCD monitoring is indispensable in setting up health programs, developing health-related policies and documenting potential progress in NCD prevention and control.

The NCD monitoring system in Albania should has three principal components:

1. Monitoring for exposure to risk factors
2. Monitoring health outcomes (NCD related mortality and morbidity rates)
3. Evaluation of NCD-related health system response capacities

## *Treatment of acute myeloid leukemia based on citogenetics and molecular biology*

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AML is the most common type of leukaemia in adults, accounting for approximately 25% of leukaemia diagnoses, with an estimated 351,965 cases worldwide.

About half of AML patients will die annually.

Detection of molecular and cytogenetic abnormalities is critical in AML.

Evaluation of molecular mutations may be important for risk assessment and prognosis to help manage the disease.

European LeukemiaNet recommendations propose screening at diagnosis for various mutations, including NPM1, CEBPA, RUNX1, TP53, ASXL1, and FLT3 ITD and TKD2

Based in clinical examination, molecular genetic testing, prognostic score is decided which will be the best treatment for AML.

The most successful induction therapy in treatments of AML was and is three days of an anthracycline, daunorubicine 60 mg/m<sup>2</sup> /day and seven days of cytarabine 100 mg/ m<sup>2</sup> /day, referred as “7+3” regimens. Complete remission is achieved in 60- 80% of younger adults and in 40-60% of older adults > 60 years. High rate of CR is not converted in survival for patients. Remission duration is about 13 months and survival about 21 months.

Consolidation therapy after CR, widely used, is HiDAC, cytarabine 2000-3000 mg/ m<sup>2</sup> every 12hrs, days 1,3,5. There are some studies about results of intermediate dose of cytarabine 1000- 1500 mg / m<sup>2</sup>. These studies have showed that there is no convincing evidence in superiority of HiDAC (cytarabine 3000 mg/ m<sup>2</sup>