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Continuing Medical Education (CME) Questions

CLL-IPI in MBL and CLL

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Parikh SA, Rabe KG, Kay NE, Call TG, Ding W, Leis JF, Kenderian SS, Muchtar E, Wang Y, Koehler AB, Schwager SM, Lesnick CE, Kleinstern G, Van Dyke D, Hanson CA, Braggio E, Slager SL, Shanafelt TD. The CLL International Prognostic Index predicts outcomes in monoclonal B-cell lymphocytosis and Rai 0 CLL. *Blood*. 2021;138(2):149-159.

1. **Your patient is a 64-year-old man with MBL and a low chronic lymphocytic leukemia international prognostic index (CLL-IPI) risk score. According to the results of the study by Parikh and colleagues of patients with Rai stage 0 chronic lymphocytic leukemia (CLL) (n = 554) and monoclonal B-cell lymphocytosis (MBL) (n = 415) seen at the Mayo Clinic between 1 January 2001 and 1 October 2018, which of the following statements about the ability of the CLL-IPI to predict time to first therapy (TTFT) and overall survival (OS) in Rai 0 CLL and MBL is correct?**
   - ☐ 5-year risk of needing therapy among MBL with low-, intermediate-, and high-/very high–risk CLL-IPI scores was 7%, 14%, and 40%, respectively
   - ☐ Estimated 5-year risk for TTFT did not differ between patient groups with low- vs intermediate-risk CLL-IPI
   - ☐ Estimated 5-year risk for OS did not differ significantly among patient groups
   - ☐ CLL-IPI at the time of initial diagnosis predicted TTFT and OS in individuals with Rai 0 CLL but not in persons with MBL
2. **According to the results of the study by Parikh and colleagues of patients with Rai stage 0 CLL and MBL seen at the Mayo Clinic, which of the following statements about the impact of incorporating absolute B-cell count along with the other individual prognostic factors in the CLL-IPI as additional factors to the CLL-IPI to predict outcomes is correct?**
   - ☐ Absolute B-cell count was not significantly associated with TTFT
   - ☐ Absolute B-cell count was not significantly associated with OS
   - ☐ Age, serum β2-microglobulin, *IGHV* mutation, *TP53* disruption status, and the absolute B-cell count were significantly associated with shorter OS
   - ☐ Age and *TP53* disruption were significantly associated with shorter TTFT
3. **According to the results of the study by Parikh and colleagues of patients with Rai stage 0 CLL and MBL seen at the Mayo Clinic, which of the following statements about OS in patients with MBL and Rai 0 CLL compared with the age- and sex-matched general population and the other implications of this study of the predictive ability of CLL-IPI in patients with Rai stage 0 CLL and MBL is correct?**
   - ☐ OS of the entire cohort and of each CLL-IPI risk group for Rai 0 CLL and MBL was similar to that in the age- and sex-matched general population of Minnesota
   - ☐ Symptoms in patients with Rai stage 0 CLL were a better predictor of OS than CLL-IPI score
   - ☐ The CLL-IPI risk score at the time of diagnosis predicted risk of Richter transformation
   - ☐ CLL patients with high/very high CLL-IPI risk score vs low-risk CLL-IPI have a 6-fold higher risk of needing therapy and should be followed more closely for progressive disease

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