

Transplant and Severe Aplastic Anemia (SAA)

Learning more about you or your child's ("your") treatment options can help you make informed medical decisions.

This fact sheet tells you:

- What SAA is
- What the transplant steps are
- When to see a transplant doctor
- Questions to ask your doctor

What is SAA?

SAA is a bone marrow disease. Bone marrow is the soft, spongy tissue inside of bones. SAA causes your bone marrow to not make enough blood cells for your body. The blood cells your body needs are:

- Red blood cells to carry oxygen
- White blood cells to fight infection
- Platelets to control bleeding

Aplastic anemia can range from mild to severe. Transplant is used to treat severe cases.

What is a blood or marrow transplant (BMT)?

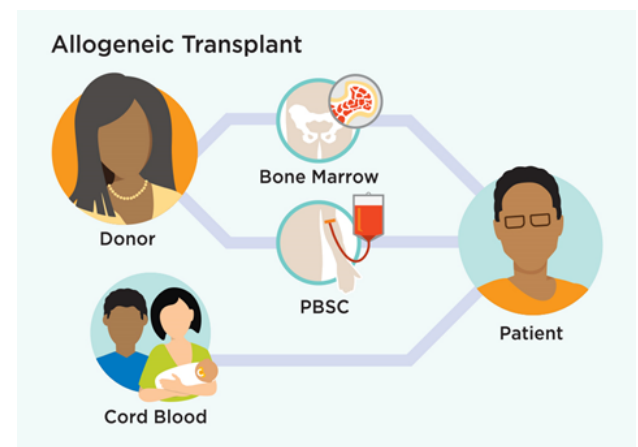
BMT, also known as a bone marrow transplant, destroys the bone marrow that's not working and replaces it with a healthy one from a donor. BMT is not surgery. Transplant is the only potential cure for SAA.

The type of transplant used for SAA is an allogeneic transplant. This type uses healthy blood-forming cells donated by someone else to replace the diseased bone marrow. The healthy cells can come from a family member, and unrelated donor, or umbilical cord blood.

Allogeneic transplant steps

1. First, your doctor searches for your donor. This can take weeks to months.
2. Next, you will get chemotherapy, and possibly radiation, to kill the unhealthy cells. This can take up to 2 weeks.
3. On transplant day, the donated cells are given to you through an intravenous (IV) infusion. The new cells travel to the inside of your bones.
4. After a few weeks, the donated cells begin to make healthy blood cells.
5. Then, you will need many months to recover. You will spend some of this time in or near the hospital.

Doctors, nurses and social workers will closely care for you during the entire process to prevent and treat any side effects or complications.



When to see a transplant doctor

Doctors recommend that you see a transplant doctor right away after you're diagnosed with SAA. Even if you don't need a transplant right away. Patients with SAA typically get blood transfusions to ease the symptoms of SAA, but that may also lower the chance that a transplant will work later.

Your first appointment with a transplant doctor

At your first appointment, the doctor will:

- Review your medical history
- Talk with you about your treatment options and their risks and benefits
- Make recommendations for you and your other doctors
- Start a donor search even if you don't need a transplant right away. This can help you get a transplant faster if it's needed later.

Questions to ask your doctor

What are the chances of a cure if I get a transplant? If I don't get one?

What are the risks of waiting or trying other treatments before a transplant?

Do I have any risk factors that might affect how well transplant will work?

What are the possible side effects of transplant? How can they be reduced?

How might my quality of life change over time, with or without transplant?



At every step, we're here to help

NMDPSM has a team dedicated to providing information and support to you before, during, and after transplant. You can contact our Patient Support Center to ask questions you may have about transplant, request professional or peer support, or free patient education materials.

Call: 1 (888) 999-6743 | Email: patientinfo@nmdp.org | Web: [BeTheMatch.org/one-on-one](https://www.bethematch.org/one-on-one)



Every individual's medical situation, transplant experience, and recovery is unique. You should always consult with your own transplant team or family doctor regarding your situation. This information is not intended to replace, and should not replace, a doctor's medical judgment or advice.

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