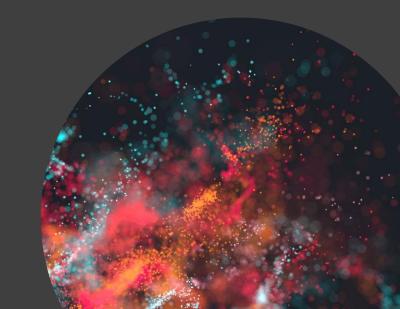


THE UPS, DOWNS AND UNFORESEEABLES OF AHSCT DURING THE COVID PANDEMIC - THE LIVED EXPERIENCE

A CASE STUDY



Edith Cinc

N-CRESS, Austin Health, Heidelberg, VIC, Australia



TOM

34 yrs

Married to Kate and has two children
11yo son and 7yo daughter
Works in Corporate finance

- 2016 sensory symptoms and optic neuritis
- 2017 Dx RRMS
- 2018 breakthrough disease on Fingolimod, switch to Ocrevus
- 2021 breakthrough disease again, sensory loss and continence dysfunction
 - Well managed with IVMP
- Referred to Austin Health for consideration of AHSCT

9TH AUGUST 2021 - N-CRESS REVIEW

TOM'S PHYSICAL EXAM:

- UNBALANCED GAIT; CAN PERFORM HEEL-TOE WALKING
- MILD INCOORDINATION LEFT ARM; BRISK REFLEXES; LEGS HYPER REFLEXIC; DOWNGOING PLANTARS; SENSORY HAND SYMPTOMS
- BLADDER URGENCY/ERECTILE DYSFUNCTION
- EDSS 3.5

DISCUSSION:

- NEED TO FIT AHSCT CRITERIA REPEAT BRAIN MRI
- RISKS OF AHSCT DISCUSSED
- GIVEN PATIENT INFORMATION SHEET AND CONSENT FORM
- Review 4 weeks for further discussion







10TH SEPTEMBER 2021

- Repeat MRI discussed at Neuro Radiology meeting evidence of a new mid brain lesion
- ELIGIBLE FOR AHSCT
- REFERRED TO HAEMATOLOGY TEAM AT AUSTIN

4 WEEKS LATER....

- HAEMATOLOGY REVIEW SUITABLE CANDIDATE
- COVID CONSIDERATIONS
- CONSENTED TO AHSCT TRIAL









DHHS directive....no elective admissions



8th October

Cyclophosphamide 1.5g/m2 (Stem Cell Mobilisation)

18th October

Apheresis Peripheral Stem Cell Harvest 4.41 x106/kg



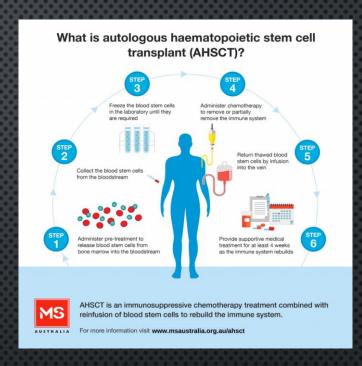
21st October

Impacted wisdom tooth required extraction



5th November

Workup went well and plan to admit for AHSCT within a week





PICC Central Line

9 Nov. 2021

Stem Cells reinfused

Day 0

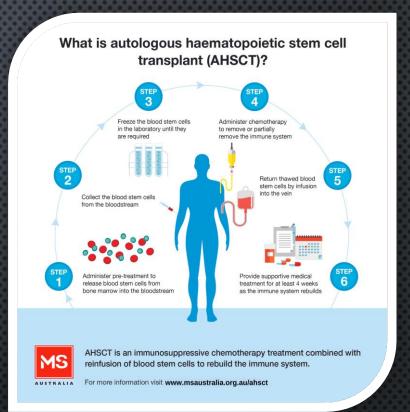
16 Nov. 2021

Commences BEAM Conditioning

10 Nov. 2021









DAY 1 - FEVER

DAY 4 - NEUT. 0.3

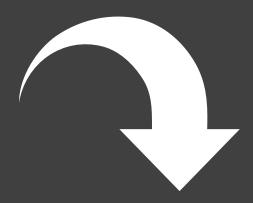
DAY 6 - FEBRILE 38.5 - SEPTIC SCREEN

Peripheral Blood Cultures <u>Serratia Marcescans</u> (Gram negative bacillus)

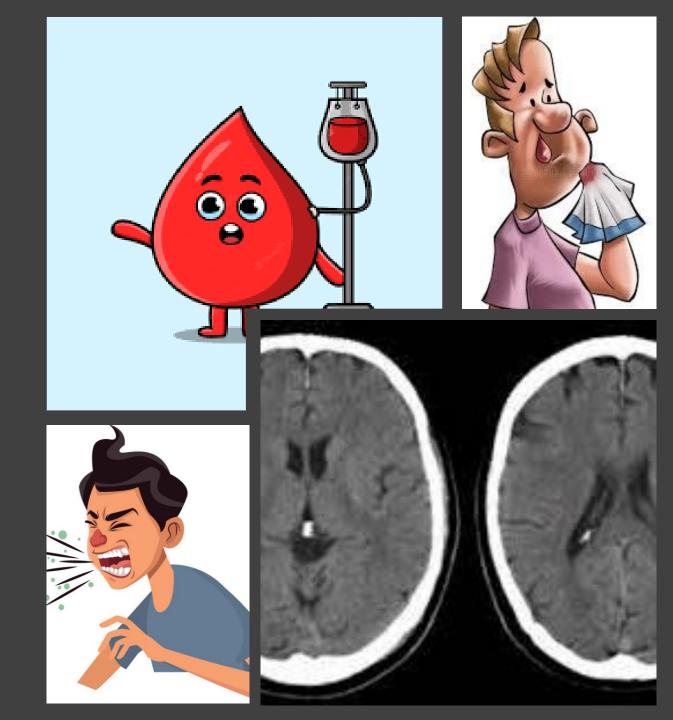
Commenced Cefepime







DAYS 7 - 11











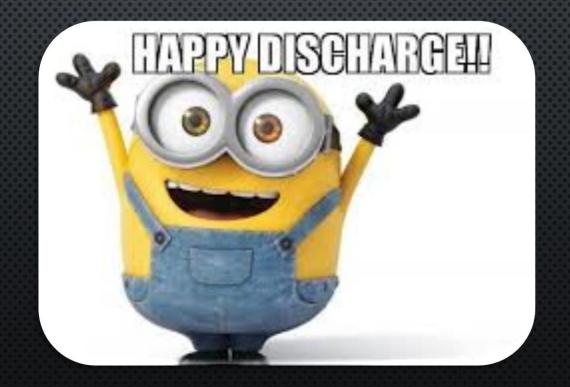


DAYS 12 - 13



Day 14 Looks and feels well. No fever in am. Antibiotics ceased.

Day 15 Hb 81 WCC 2.8 Neut 1.9 Plt 150





DAY 16

PHONE CONTACT WITH WIFE, KATE.

TOM VERY KEEN TO RESUME EXERCISE. ADVISED STILL RECOVERING AND NEED TO PACE



Lead up to Christmas 2021

Days 17 - 20



Febrile, Joint Pain Admitted to Haem; HHV-6; IV AB's

Day 23



Well; Walking daily; Pacing

Day 26 – 33



Chest pain/cough/fever
Admit Haematology
Bilateral Multilobar Pneumonia
Referred to Respiratory and ID
CT Guided Lung Biopsy-complex

Day 34 / Dec 20



Discharged home



DAY 43 WALKING UP TO 2KM/DAY

DAY 60 REPEAT CT CHEST

DAY 85 DOING VERY WELL











3 MONTHS POST AHSCT

6 MONTHS POST AHSCT

NEUROLOGICAL REVIEW

EDSS 1.5

MRI STABLE



9 months post AHSCT

CT Chest further improvement

Respiratory function tests: normal











MS Nurse Lessons Learned

- EMPATHY....SIMPLE....PUT YOURSELF IN THEIR SHOES...YOU SEE AND CARE FOR MANY PEOPLE WITH
 MS EVERY DAY BUT YOUR PATIENTS DON'T. IT IS NORMAL FOR THEM AND THEIR FAMILIES TO BE
 ANXIOUS AND SCARED, PARTICULARLY IN SITUATIONS WHERE THEY HAVE ABSOLUTELY NO CONTROL
- Patients look to their Health Care Professional for reassurance, so reassure them
- BE CONFIDENT IN YOUR SKILLS AND EXPERIENCE AND YOUR ABILITY TO APPLY THESE TO NEW AND EVOLVING SITUATIONS
- Utilise other allied health resources if available/accessible. MS nurses are in the privileged position of knowing how and where to access help. We are good navigators and "logistics" experts
- IT IS IMPERATIVE TO TAKE TIME FOR SELF CARE...PRACTICE WHAT YOU PREACH

THANK YOU

Dead Edith,

Thankyou so much

for looking after my

dad .

He really appreciated it!

Thankyou, have a happy new year

From



(My smiley Emoji)

