## Post-transplant malignancy

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Post-transplant malignancy is recognized as a major limitation to the success of solid organ transplantation and it is currently considered one of the unavoidable side effects of long-term immunosuppressive therapy. Immunosuppressed organ allograft recipients have a several fold increased risk of developing tumors in general, but the risk of developing certain malignancies could reach several hundred folds compared to normal population. The most common malignancies associated with compromised immune system are post-transplant lymphomas and lymphoproliferative disorders (PTLD), Kaposi's sarcoma (KS), renal carcinomas, carcinomas of the uterine cervix, hepatobiliary carcinomas, anogenital carcinomas and various sarcomas.

Prevention of morbidity and mortality resulting from post-transplant malignancy should become a main endpoint in solid organ transplant programs. Several factors could play a role in development of post-transplant malignancies, and subsequently several measures may be undertaken to reduce the incidence of cancer after transplantation. These include low dose immune suppression, screening the transplants for presence of latent viruses (EBV & CMV), preventive measures to reduce viral infection in transplant patients and in addition to conventional treatments, patients who received any transplant may receive antiviral drugs, interferon- $\alpha$  and various other manipulations of the immune system.

## **Biography**

Gayane Badalian -Very, being one of the leading physicians of the world is a general surgeon at Dana Farber Cancer Institute. She has completed her practice at Harvard Medical School and worked for Brigham and women's Hospital. She has a grant awarded in 2011 for "A BRAF V600E-Drive Mouse Model of Langerhans Cell Histiocytosis" with the award of \$ 50,000. She has also received Claudia Adam Barr Award in February 2012.

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