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Summary

THE EFFECT OF S-ADEMETIONINE ON PLASMA CITRULLINE LEVEL IN PATIENTS WITH CHRONIC LYMPHOPROLIFERATIVE DISORDERS WITH CHEMOTHERAPY-INDUCED DIARRHEA

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S-adenosylmethionine as adjuvant treatment attenuated chemotherapy-induced gastrointestinal injury in patients with chronic lymphoproliferative disorders, as indicated by higher plasma citrulline levels.

KEY POINTS

- In 24 patients with chronic lymphoproliferative disorders receiving chemotherapy regimens (BR, FCR, or R-CHOP), S-adenosylmethionine (1000 mg/day IV for 10 days, then 500 mg twice daily for 20 days) was compared to chemotherapy alone over 3 courses.
- Chemotherapy alone was associated with enterocyte injury, demonstrated by 1.66 times lower plasma citrulline levels (p=0.0002) compared to baseline in the chemotherapy-only group.
- S-adenosylmethionine treatment resulted in 1.23 times higher blood citrulline levels (p=0.0005) after chemotherapy compared to the chemotherapy-only group, suggesting attenuation of intestinal dysfunction.
- Patients with chronic lymphoproliferative disorders had pre-existing mucosal injury before chemotherapy, with 1.25 to 1.26 times higher blood NANA concentrations than healthy controls.
- This material is most relevant for oncologists and gastroenterologists managing gastrointestinal complications in patients receiving chemotherapy for chronic lymphoproliferative disorders.

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