

The recent advance in surveillance and treatment for viral infection after hematopoietic stem cell transplantation

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Virus infection or reactivation has caused significant morbidity and mortality in hematopoietic cell transplant (HCT) recipients. As there is a rapid change of HCT modalities including older recipients, unrelated and even mismatched donors, and more potent immune-suppressants through HCT, the viral infection associated morbidity and mortality is significantly increasing, e.g., cytomegalovirus (CMV) and Epstein–Barr virus (EBV). In different countries and HCT centers, the policy of surveillance and treatment for viral infection after HCT usually varies according to the prevalence of these viruses and the availability of relevant assays and treatments. Here, I will briefly introduce international guidelines and current status in surveillance and treatment for several common viral infections in HCT recipients of Taiwan, including hepatitis B virus, herpes viruses, CMV and EBV.