

The conditioning therapy consists of the following:

Day	Drug	Dose
-8	Campath	0.2 mg/kg
-7	Campath Fludarabine	0.2 mg/kg 30 mg/m ² IV over 30-60 min (dose adjust if age <12 months)*
-6	Campath Fludarabine	0.2 mg/kg 30 mg/m ² IV over 30-60 min
-5	Campath Fludarabine	0.2 mg/kg 30 mg/m ² IV over 30-60 min
-4	Campath Fludarabine	0.2 mg/kg 30 mg/m ² IV over 30-60 min
-3	Fludarabine CsA/MMF	30 mg/m ² IV over 30-60 min Start CsA (and MMF if mismatched donor or PBSC)
-2	Melphalan	140 mg/m ² IV over 30 min (dose adjust if age <12 months)*
-1	Rest	
0	Stem cell infusion	
+8		GCSF 5mcg/kg/d until ANC>1000

Melphalan:

Melphalan will be administered intravenously on day –2 over 15-30 minutes. Preparation, administration and monitoring will be according to standard practice procedures of local institution.

Fludarabine:

Fludarabine will be given IV daily on days -7, -6, -5, -4, -3, over 30-60 minutes. Preparation, administration and monitoring will be according to standard practice procedures of local institution.

Campath1H (Alemtuzumab):

Prepare Campath-1H for IV infusion immediately prior to use. The required dose should be drawn up into a syringe from the ampulle or vial and further diluted in 100 mL of 0.9% Sodium Chloride or 5% Dextrose, USP. Gently invert the bag to mix the solution;

do not shake. Administer dose over 2 hours on days -8, -7, -6, -5, -4.

Premedication:

Twelve hours prior to start of infusion of Campath administer methylprednisolone 1mg/kg IV, then one hour prior to each dose of campath, repeat dose of methylprednisolone (1 mg/kg IV). 30 minutes prior to start of each infusion administer acetaminophen (paracetamol) 15mg/kg/dose and diphenhydramine 1.25 mg/kg/dose, may repeat Tylenol, and diphenhydramine 4-6 hrs after start of the infusion. Administer dose over 2 hours. In case of reactions, dose of methylprednisolone dose may be increased to 2mg/kg or other institutional management methods may be instituted.

Campath 1H substitution

For institutions where Campath 1H is not available, or if severe reactions not manageable with intensification of premedications, Thymoglobulin may be substituted at a dose of 2.5 mg/kg given on days -6, -5, -4, -3, -2. Use same premedications as for Campath