HOROSCOPE

ARIES
(MAR 21-APR 20)

Consider switching careers. See things from your children's perspective. Keep your eyes peeled for hidden messages. Your lucky day this week will be Thursday.

TAURUS
(APR 21-MAY 21)

Spend some alone time this week. Look into physical enhancement programs. Think about your priorities. Your lucky day this week will be Saturday.

GEMINI
(MAY 22-JUN 21)

Put your thoughts into action. Go on a trip with your partner. Advancement opportunities at work are apparent. Your lucky day this week will be Sunday.

CANCER
(JUN 22-JUL 22)

Work with knowledge people to solve any issues. Residential moves will be favourable. Try to avoid over-indulgence. Your lucky day this week will be Sunday.

LEO
(JUL 23-AUG 22)

Avoid individuals you don't get along with. Try to plan something with friends. Take care of yourself this week. Your lucky day this week will be Saturday.

VIRGO
(AUG 23-SEP 23)

Your doubt could lead to insecurity. Your efforts will be rewarded. Hassles with family could be hurtful. Your lucky day this week will be Friday.

LIBRA
(SEP 24-OCT 23)

Catch up on correspondence. Major moves will not be to your benefit. Channel your energy into work. Your lucky day this week will be Monday.

SCORPIO
(OCT 24-NOV 21)

Make changes regarding your friendships. Opportunities for romance is on the horizon. Tie up loose ends this week. Your lucky day this week will be Wednesday.

SAGITTARIUS
(NOV 22-DEC 21)

Avoid confrontations at home. Go after your goals. Short trips will be educational. Your lucky day this week will be Tuesday.

CAPRICORN
(DEC 22-JAN 20)

Family members can cause anger. Keep things smooth with your partner. Take advantage of any upcoming opportunities. Your lucky day this week will be Wednesday.

AQUARIUS
(JAN 21-FEB 19)

Counsel from close friends will help solve problems. Travel will be entertaining. Don't spend too much on entertainment. Your lucky day this week will be Tuesday.

PISCES
(FEB 20-MAR 20)

Do the best you can. Your relationship may undergo some changes. Don't blow situations out of proportion. Your lucky day this week will be Tuesday.

DR. COLIN PHIPPS DIONG *Senior Consultant, Haematology*
Parkway Cancer Centre and Mount Elizabeth Hospitals, Singapore

Dr Colin Phipps Diong specialises in lymphoma and blood cancers, and haematopoietic stem cell transplantation. He was awarded the HMDP fellowship to pursue subspecialty training in lymphoma and bone marrow transplantation at the renowned Fred Hutchinson Cancer Research Centre in Seattle

canHOPE DHAKA

Dr Colin Phipps Diong, Parkway Cancer Centre's new consultant specialising in lymphoma and blood cancers, and haematopoietic stem cell transplantation, explains haematopoietic stem cell transplantation.

Transplanting blood stem cells Haematopoietic Stem Cell Transplantation (HSCT)

WHAT IS HAEMATOPOIETIC (BONE MARROW) TRANSPLANTATION?

The term haematopoietic stem cell (HSC) refers to cells made in the blood factory or bone marrow that have the potential to grow into almost any type of blood cell.

Transplantation of HSC (HSCT) is done in order to re-establish bone marrow and immune system function after being damaged and/or attacked by blood cancer.

The first adult HSCT in Singapore was performed in July 1985, on a patient with relapsed acute leukaemia. Before the HSC infusion, the patient received radiation to his entire body with certain vital organs shielded. The treatment that immediately precedes infusion of HSC is called conditioning therapy and is given to help kill tumour cells, "wipe out the memory" of the recipient's immune system, and create "space" within the bone marrow for the incoming stem cells to grow.

In the case of transplants using HSC derived from other people, the conditioning therapy also helps reduce the risk of the recipient's body killing or rejecting the incoming donor stem cells (graft rejection).

WHO IS IT FOR?

The most common indications for HSCT are blood cancers, mainly acute leukaemia, cancers of the lymphatic tissues (lymphomas) and the antibody-forming blood cells (multiple myeloma).

Other indications include bone marrow failures, autoimmune diseases and neurological conditions like multiple sclerosis that have failed standard treatments.

WHAT ARE THE TYPES OF HSCT?

HSCT can be broadly divided into autologous transplantation, where patients use their own blood stem cells, and allogeneic transplantation, where stem cells are obtained from a different person.

The rationale underlying autologous transplantation is to deliver high doses of chemotherapy (with or without radiotherapy).

The reinfusion of the patient's own stem cells acts to rescue the bone marrow from toxicity. Stem cells are collected (harvested) before conditioning therapy starts and are usually frozen until it is time for use. Whereas anti-tumour effects rely solely on high-doses of chemotherapy in autologous transplants, allogeneic HSC may also have beneficial immune activity that kills tumour/leukaemia.

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