

Arrow Foundation

- Support
- Education
- Research



Patient and Carer Support

- 696 patient and carers supported in FY26
- Financial support, emotional support and information
- Patient Facebook community group coming soon!



Patient care packs

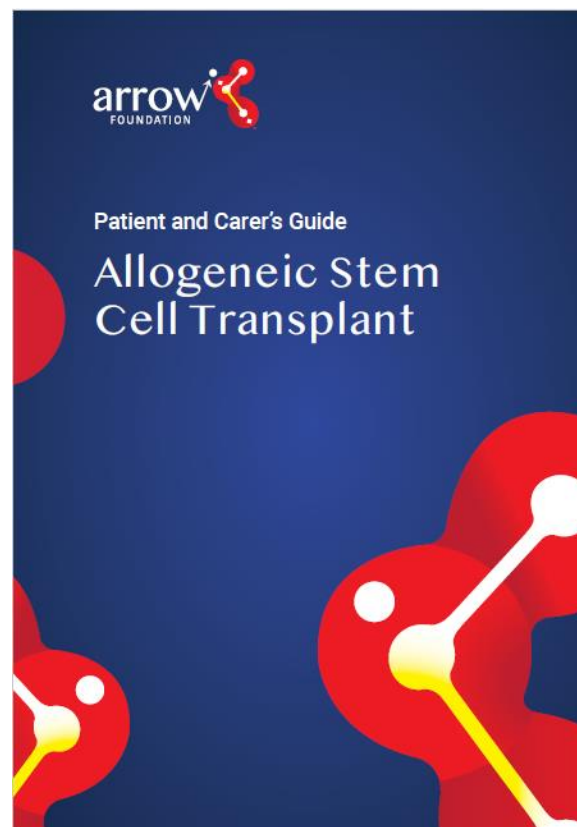
- Patient care packs launched at 3 hospitals
- 150 packs distributed



New Allogeneic Patient Information Guide now released!

Available at:
<https://arrow.org.au/patient-support/>

Hard copies available in
our patient care packs



CHAPTER 2

About stem cell transplants

A stem cell transplant is a treatment for serious blood cancers and diseases of the bone marrow or immune system that were once incurable. The first successful transplant was performed in 1968, and today stem cell transplants save thousands of lives. Each year, about 2000 Australians have a stem cell transplant. However, not everyone can have a transplant, because sometimes a suitable donor cannot be found or the person is too unwell.

What is a stem cell transplant?

A stem cell transplant replaces unhealthy bone marrow with healthy stem cells.

High-dose chemotherapy and sometimes total body irradiation (TBI) are used to treat the disease. These treatments can also damage bone marrow, so healthy stem cells are given into a vein (intravenously). This helps restore the bone marrow and immune system so the body can make new red blood cells, white blood cells and platelets.

This process not only restores bone marrow function, but also creates a new healthy immune system for the patient.

Where stem cells are collected from

Stem cells can be collected in different ways:

Peripheral blood stem cell transplant (PBSCT) – stem cells are collected from the bloodstream after medicines are given to move them out of the bone marrow. This is the most common method for adults. It is usually done as an outpatient, and you don't need a general anaesthetic.

Bone marrow transplant (BMT) – stem cells are collected directly from the bone marrow under a general anaesthetic. BMT is most commonly used for children.

Cord blood transplant (CBT) – stem cells come from donated umbilical cord blood. This is less common in adults but sometimes used for children.

Types of transplants

There are 2 main types of stem cell transplants:

Allogeneic transplant

This uses stem cells from a donor. There are 3 types of allogeneic transplants:

Myeloablative – uses higher dose treatment to destroy the bone marrow and kill cancer cells.

Reduced-intensity conditioning (RIC) allo – uses lower dose treatment to weaken the immune system rather than completely destroying the bone marrow. RIC works more like an immune system transplant, where the donor's cells grow and attack cancer cells. This is known as the graft-versus-tumour effect (see page 51).

Non-myeloablative – uses very low-dose treatment to suppress the immune system without destroying the bone marrow.

Autologous transplant

This uses your own stem cells. It's usually offered if the disease is in remission or doesn't affect the bone marrow (e.g. myeloma, Hodgkin lymphoma, non-Hodgkin lymphoma).

Stem cells are collected from the patient's blood, stored and returned after high-dose chemotherapy or radiation therapy.

This book focuses on allogeneic transplants. For more information on autologous transplants, see our Autologous Stem Cell Transplant Patient and Carer's Guide.



CAR-T cell therapy

CAR-T cell therapy is a treatment where your own immune cells are changed in a lab so they can recognise and attack cancer cells. These T cells are then given back to you. They are part of new treatments that use the immune system to treat cancer. For some people, these treatments may be an alternative to an allogeneic stem cell transplant, or may be used before a transplant to help control the disease.

Who can have a transplant?

When assessing if you're suitable for a stem cell transplant, your transplant team will consider:

- your age
- general health
- type and stage of your disease
- whether you have a donor
- whether you have people to support you after the stem cell transplant.

Who's on the team?

Stem cell transplants can only be performed in certain hospitals. An expert team of doctors, nurses and support staff will care for you throughout the transplant process. This includes:

- **Hematologist** – oversees your treatment plan
- **Transplant physician** – manages the transplant process
- **Radiation oncologist** – provides radiation therapy if needed
- **Clinical nurse consultant and nurse practitioner** – provide expert clinical care, and support you and your family
- **Nurses** – provide day-to-day care
- **Pharmacist** – helps you and the transplant team manage medicines
- **Cellular therapy scientists** – test, prepare and process donor cells to make sure they are safe and ready for infusion
- **Dietitian** – supports your nutritional needs
- **Social worker** – offers emotional and practical support
- **Physiotherapist** – helps restore movement and mobility
- **Occupational therapist** – helps you adapt your living environment and daily activities
- **Oncodermatology specialist** – provides advice and options for preventing or managing fertility before or after treatment
- **Counselor, psychologist** – help you manage your response to the transplant and offer coping strategies.

Other people who may care for you include the pain management team, spiritual practitioners and the palliative care team. Your general practitioner (GP) will also provide support.

Healthcare Professional Education

- 27 Healthcare Professionals supported in FY26
- \$58k in scholarships funded – Graduate Certificate, Masters and Travel





Research

2027 PhD Scholar soon to be announced

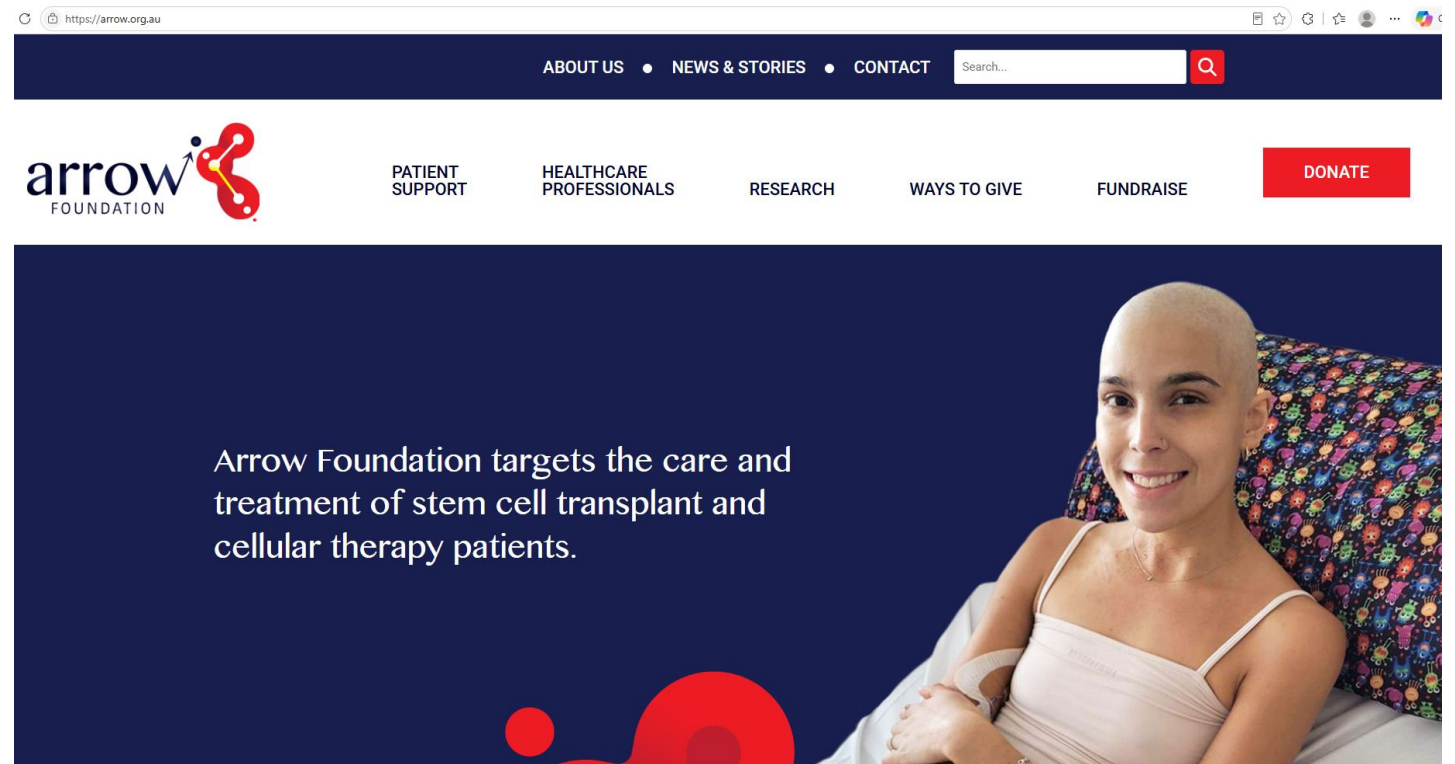
- Katerina Terolli: 2026 PhD Scholar
- Cathy Pendergrast: 2025 PhD Scholar
- Michael Ashby: 2024 PhD Scholar



New website

Visit us!

www.arrow.org.au



New fundraisers

- Sydney Marathon
- Friends of Arrow



Let's Paint the Town Red tonight!

