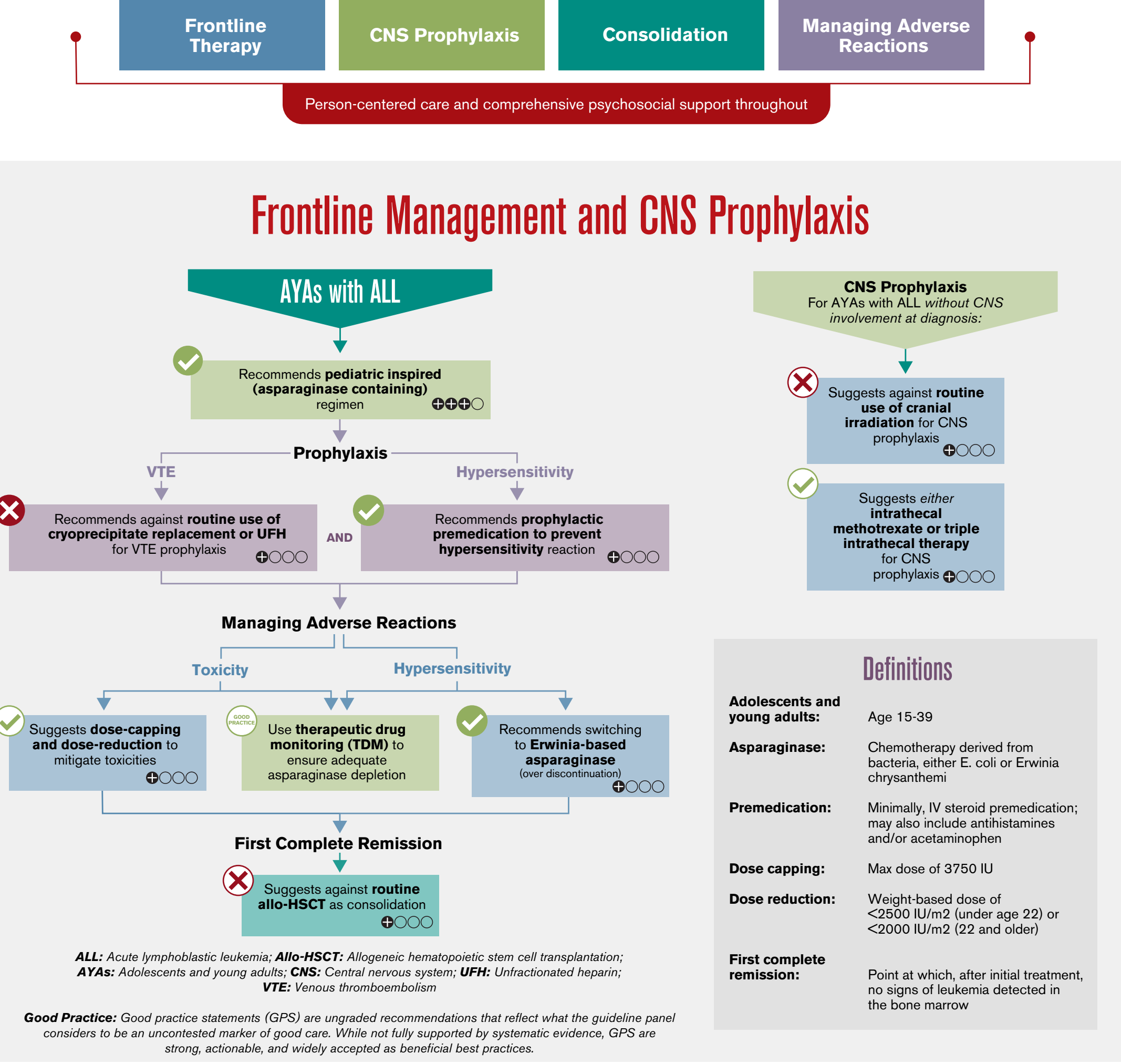


# ASH 2026 Guidelines for Frontline Management of Acute Lymphoblastic Leukemia in Adolescents and Young Adults (ALL in AYAs)

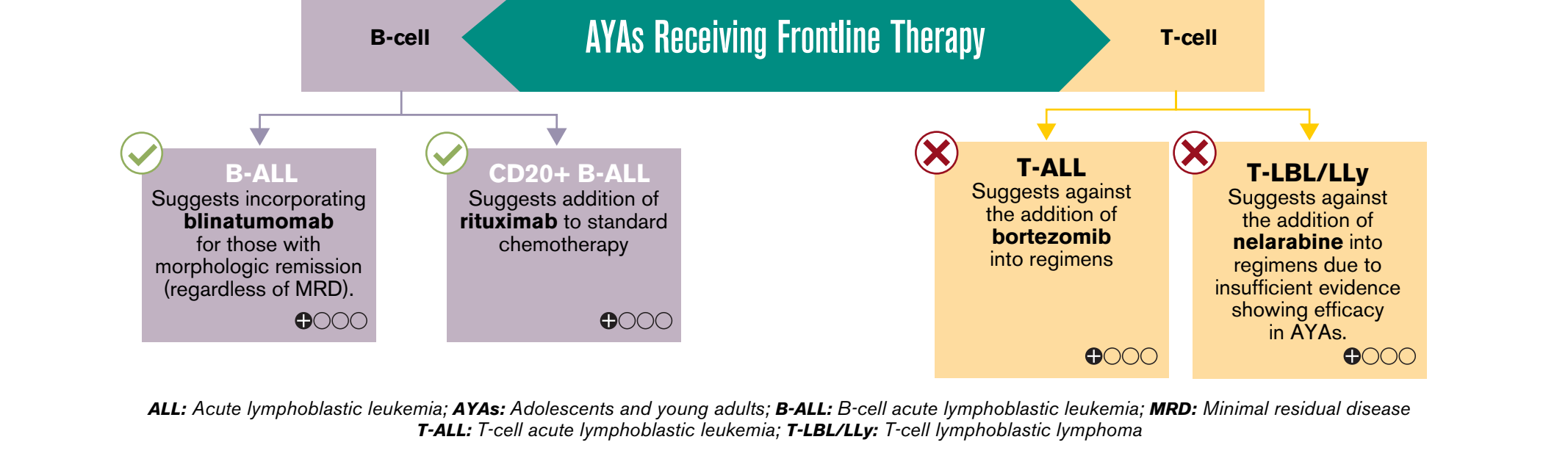
Visual Summary of Recommendations



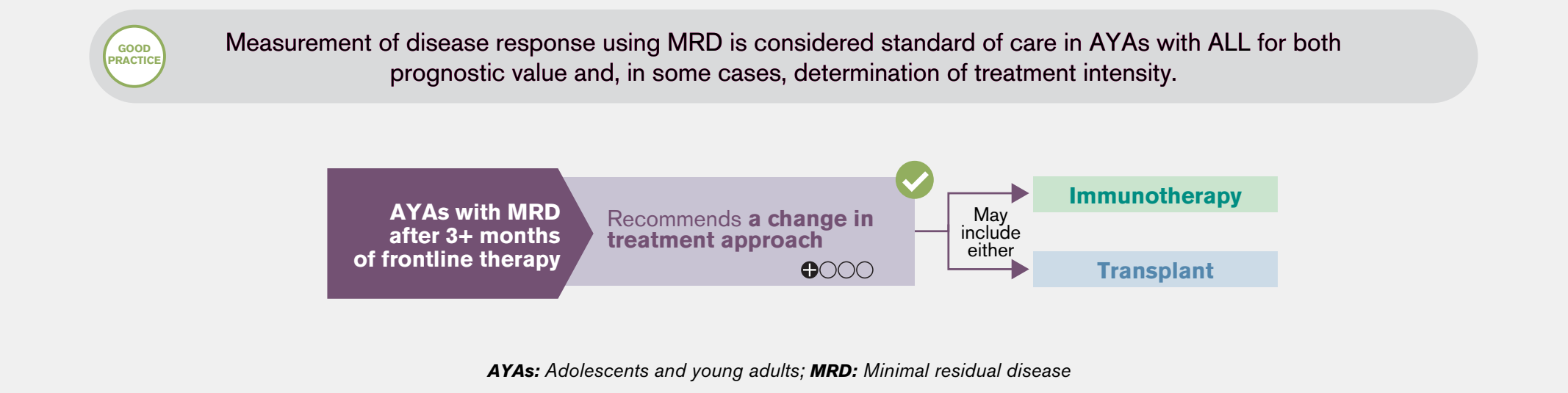
## Frontline Management of ALL in AYAs



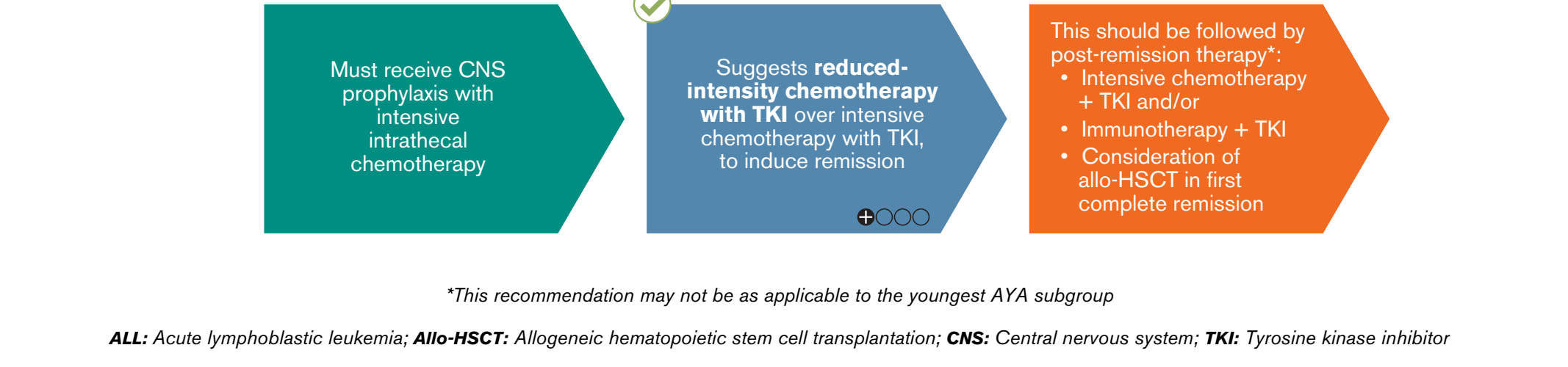
## Therapies for Specific Subsets



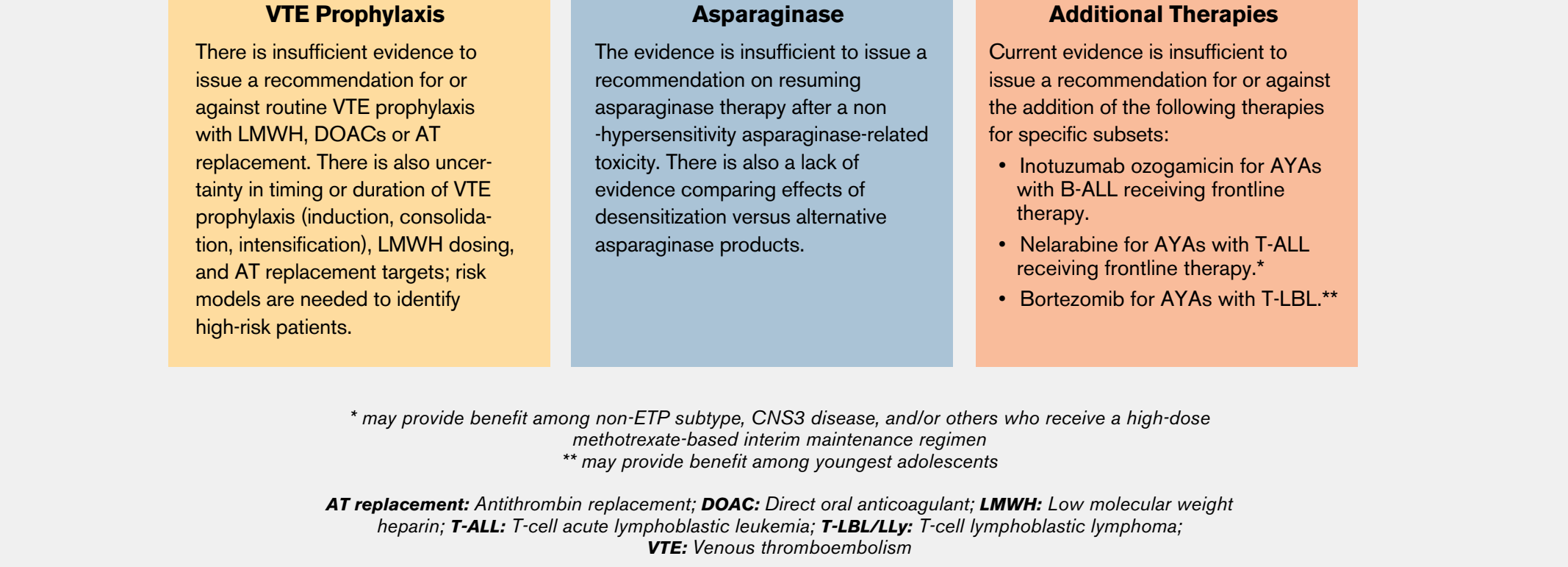
## Minimal Residual Disease



## Treatment for Ph+ ALL



## Evidence Gaps



## Psychosocial Care for AYAs



Learn more about the ASH 2026 Clinical Practice Guidelines on ALL in AYAs at [hematology.org/ALLguidelines](https://hematology.org/ALLguidelines)

Recommendation Strength			
Recommends...	Recommends against...	Suggests...	Suggests against...
✓	✗	✓	✗
INTERPRETATION OF STRONG RECOMMENDATIONS		INTERPRETATION OF CONDITIONAL RECOMMENDATIONS	
Patients	Most individuals in this situation would want the recommended course of action, and only a small proportion would not.	Most individuals in this situation would want the suggested course of action, but many would not. Decision aids may be useful in helping patients to make decisions consistent with their individual risks, values, and preferences.	
Clinicians	Most individuals should follow the recommended course of action. Formal decision aids are not likely to be needed to help individual patients make decisions consistent with their values and preferences.	Different choices will be appropriate for individual patients; clinicians must help each patient arrive at a management decision consistent with the patient's values and preferences. Decision aids may be useful in helping individuals to make decisions consistent with their individual risks, values, and preferences.	
Policymakers	The recommendation can be adopted as policy in most situations. Adherence to this recommendation according to the guideline could be used as a quality criterion or performance indicator.	Policymaking will require substantial debate and involvement of various stakeholders. Performance measures should assess if decision making is appropriate.	
Researchers	The recommendation is supported by credible research or other convincing judgments that make additional research unlikely to alter the recommendation. On occasion, a strong recommendation is based on low or very low certainty in the evidence. In such instances, further research may provide important information that alters the recommendations.	The recommendation is likely to be strengthened (for future updates or adaptation) by additional research. An evaluation of the conditions and criteria (and the related judgments, research evidence, and additional considerations) that determined the conditional (rather than strong) recommendation will help identify possible research gaps.	

Evidence Certainty	
High Certainty	
++++	We are very confident that the true effect lies close to that of the estimate of the effect.
Moderate Certainty	
+++○	We are moderately confident in the effect estimate: the true effect is likely to be close to the estimate of the effect, but there is a possibility that it is substantially different.
Low Certainty	
++○○	Our confidence in the effect estimate is limited: the true effect may be substantially different from the estimate of the effect.
Very Low Certainty	
+○○○	We have very little confidence in the effect estimate: the true effect is likely to be substantially different from the estimate of the effect.

DuVall, A.\*, McNeer, J.\*, Cheung, M.C., Adrianzen-Herrera, D., Advani, A., Aljurf, M., Audino, A., Benitez, L., Deeter, A., Dworkin, E., Hiltbrand, O., Isenlumbe, L., Jain, H., Li, L., Miller-Chism, C., Mozesohn, L., Ng, A., Pu, J., Shafer, D., Vargas-Madueno, F., Viny, A., Wadhwa, A., Yang, J., Zarnegar-Lumley, S., Mai, H.J., Kanaan, G., Sereda, Y., Saldanha, I., Balk, E., Stock, W.†, Wolfson, J.† American Society of Hematology 2026 guidelines for Frontline Management of Acute Lymphoblastic Leukemia in Adolescents and Young Adults (ALL in AYAs). *Blood Advances*. doi: <https://doi.org/10.1182/bloodadvances.2025006469>.

\* DuVall, A. and McNeer, J. contributed equally to this work and share co-first authorship as co-writers of the guideline panel.

† Stock, W. and Wolfson, J. contributed equally to this work and share co-senior authorship as co-chairs of the guideline panel.