

Session IVa

Recent Advances in Lymphoma



Panel Discussion

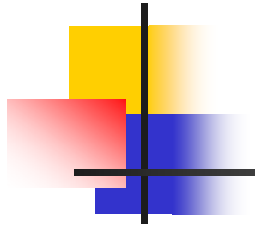
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**8th Princess Margaret Hospital Conference
New Developments in Cancer Management
October 16-18, 2008**



Case #3

- **68 yr man**
- **PMHx**
 - **Hypertension x 5 yrs, medically controlled**
 - **High Cholesterol x 5 years medically controlled**
 - **Otherwise well**



- **Past Hx – Mycoses fungoides**
 - **Diagnosed 8 years ago - stage 1a**
 - **Treated initially with steroid creams**
 - **PUVA treatments x 100 sessions 4 years ago for progressive skin disease**
 - **partial response**
 - **No further treatments**



Current Status

- Presents with 2 month history of
 - rapid progression of total body erythroderma >90% body surface area
 - No tumours or skin breakdown
 - Feeling fatigued and very pruritic
 - Otherwise stable
- Hb 140, plts 350
- WBC 14
 - 3×10^9 sezary cells
 - Neut 7, lymph 2, eos 2
- LDH 320 (ULN 250)
- Other chemistry normal



Current Status

- **Physical – diffuse adenopathy axilla /groin**
 - up to 2-3 cm
- **CT scans confirm peripheral adenopathy**
 - largest in axilla 2.8 x 2.2 cm
- **No evidence of organ involvement or central nodes on CT scans**

- **Biopsy of largest axillary node**
 - **Diffuse infiltrate atypical lymphoid cells**
 - **Predominantly CD4+ T, loss of CD7**
 - **TCR gene rearrangement positive**
 - **Many scattered CD 30 large cells seen (15-20%)**



How would you approach?

- **Treat as PTCL NOS –i.e. large cell transformation?**
 - **CHOP based chemotherapy?**
- **Treat as advanced CTCL / sezary**
 - **Stage IVa**



Advanced CTCL / Sezary

- **Combination therapy – followed by maintenance**
- **Skin based**
 - Total Skin Electron Beam
 - PUVA
- **Immunomodulation**
 - Interferon Alpha (3 mill units/m²/3x/week)
 - Extracorporeal photophoresis
- **Oral Retinoid**
 - Bexarotene
 - Isotretinoin



What if combination therapy fails?

- **Alternative Agents**
 - **SAHA (Vorinostat)**
 - 30% RR (partial) as single agent in advanced CTCL
 - **Denileukin diftitox**
 - 30% RR (most partial) as single agent
 - Combinations with oral retinoids
 - **Alemtuzumab**
 - Complete remissions reported (30%)
 - Low dose sc intermittent therapy



What if combination therapy fails?

- **Chemotherapy?**
 - Gemcitabine
 - CHOP

- **Role of allogeneic stem cell transplant?**
 - Long term remissions?
 - Reduced intensity conditioning?