Thoracic malignancies, other

THORACIC MALIGNANCIES AND OTHER SECOND NEOPLASMS IN HODGKIN LYMPHOMA SURVIVORS

E. Almagro-Casado, D. Pérez-Callejo, J. Rubio-Martínez, F. Franco, M. Paña Kotlowska, A. Gonzaga, R. Núñez, C. Maximiano, M. Méndez García, M. Provencio Pulla

Medical Oncology, Hospital Puerta de Hierro Majadahonda, Majadahonda, SPAIN

Aim: Patients cured of Hodgkin Lymphoma (HL) have an increased risk of developing Second Neoplasms (SN). We compared characteristics of patients with Thoracic malignancies (TM), (lung cancer or mesothelioma) to other SN.

Methods: 604 patients treated of HL and monitored in our hospital from 1968 to 2012 were retrospectively analyzed.

Results: We found 90 (14.5%) SN: 27 (30%) patients developed TM and 63 (70%) other SN. Median age at HL diagnosis was similar in both groups (p=0.31) whereas elapsed time until SN diagnosis was 16.5 and 11.0 years respectively (p=0.004). In TM group, 85.5% of patients were men (p=0.001) and 85.2% were smokers (RR 3.4 CI95% 1.3-8.9, p=0.003). Concerning HL stage at diagnosis 25.9% in TM and 50.8% in other SN had advanced stages (p=0.029). Chemotherapy treatments received for HL were similar in both groups whereas radiotherapy when compared with combined treatment or chemotherapy was associated with an increased risk of TM (RR=2.3, CI 95% 0.9-5.9 p=0.07). The majority (59.2%) of patients with TM were diagnosed after consulting for new symptoms and had advanced stages. Adenocarcinoma was the most prevalent histology. Overall survival at 1 and 5 years in TM and other SN group was 59%/62%, and 24%/41% respectively (p=0.05). Considering the 604 patients, cumulative incidence of SN in general at ten and twenty-five years was 7.6% and 31.3% respectively and in TM group 1.5% and 9.7%.

Conclusions: Smoking habit, male gender as well as radiotherapy are associated to the development of TM. Patients diagnosed of advanced stages of HL develop more frequently other SN. Moreover we found longer elapsed time until diagnosis of SN in TM group and shorter overall survival. The role of SN screening has yet to be prospectively evaluated.

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