Oral Session (Oral presentations categorized by each organ)

A RETROSPECTIVE ANALYSIS OF HODGKIN LYMPHOMA: CLINICAL FEATURES AND PROGNOSIS OF 56 CASES IN OUR INSTITUTION

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Background: Patients older than 60 years account for approximately 20% of all Hodgkin lymphoma (HL). Chemotherapy with doxorubicin, bleomycin, vinblastine, and dacarbazine (ABVD) is regarded as standard of care in these patients. However, little is known about the feasibility and efficacy of ABVD in this age group.

Patients and Methods: We retrospectively analyzed the efficacy and outcome of the 1st line treatment in older patients (age > 60 years) with HL who were treated in Komagome Hospital from November 1992 to September 2012; results were compared with those of younger patients.

Results: A total of 56 patients were identified. Patients’ characteristics were as follows. The median age was 56 years, (range, 16-83), with 27 (48%) patients older than 60 years; there were 27/11/7 for the performance status (PS) of 0-1/≥2/NA, respectively; 45 cases (80%) were treated with ABVD or similar regimen for the 1st line; the median follow-up period was 1330 days. We compared the elderly patients (>60 years) with the younger population (≤60). The overall response rates were 55.6% for the elderly and 93.1% for the younger population. The 5-year survival rates were 46.5% (95% CI, 24.3-66.1) for the elderly and 95.8% (95% CI, 73.9-99.4) for the younger population (P < 0.05), the 5-year progression free survival rates were 42.7% (95% CI, 23.5-60.6) and 59.9% (95% CI, 38.9-75.7), respectively (P > 0.05). There was a trend that elderly patients had advanced-stage disease (66.7%), compared with 31.0% in younger population. The poor outcome of the elderly patients was more evident with those with advanced stage, resulting in the 5-year survival rate of 42.0% (95% CI, 16.3-66.1).

Conclusions: Patients of Hodgkin Lymphoma aged > 60 showed poor outcome and there was a room for improvement of 1st line treatment.