

Retrospective review of patients treated with IVE/MTX autologous stem cell transplant for T cell lymphoma

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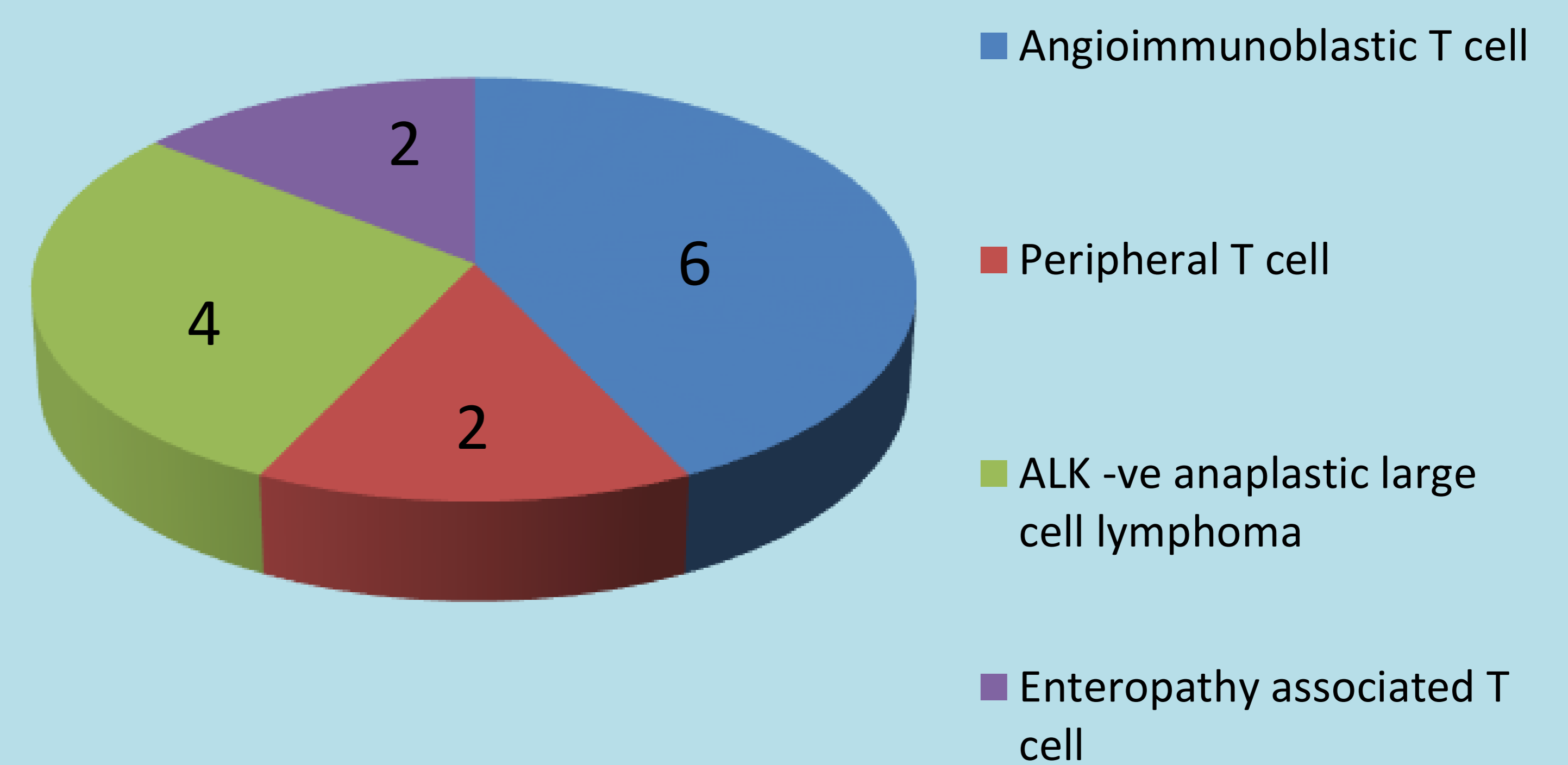
Introduction

- T Cell lymphoma is a rare subset of lymphoma often associated with poor outcomes
- The data for optimal management can be conflicting due to the small numbers of patients and lack of randomised data. As well as a lack of clear standards of care.
- In Newcastle-upon-Tyne Hospital trust we have adopted a regime of IVE + Methotrexate followed by autologous stem cell transplant for our fitter patients. We aimed to retrospectively review outcomes.

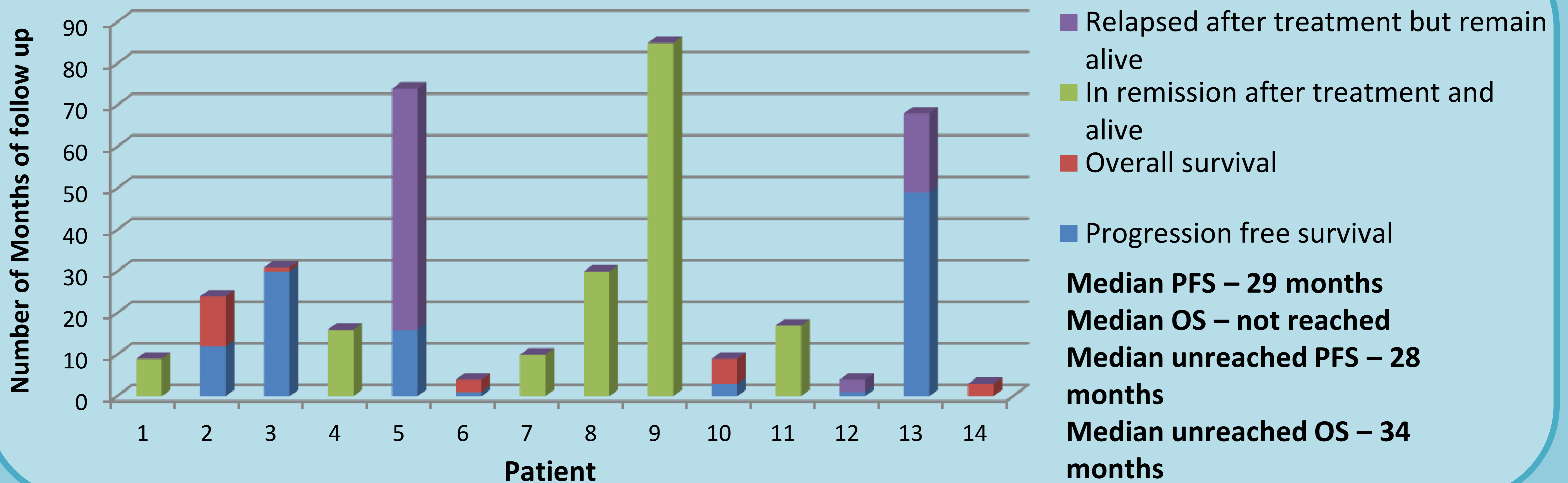
Methods and demographics

- 14 patients with T cell lymphoma between 2013-2018.
 - Retrospective study
 - Consecutive patients
 - Age range 33-65; median 53
 - Performance status 0-1
 - 10 stage 3-4 disease
 - 3 Bulky disease.
- Omitted ALK positive Anaplastic large cell lymphoma as these patients received CHOEP

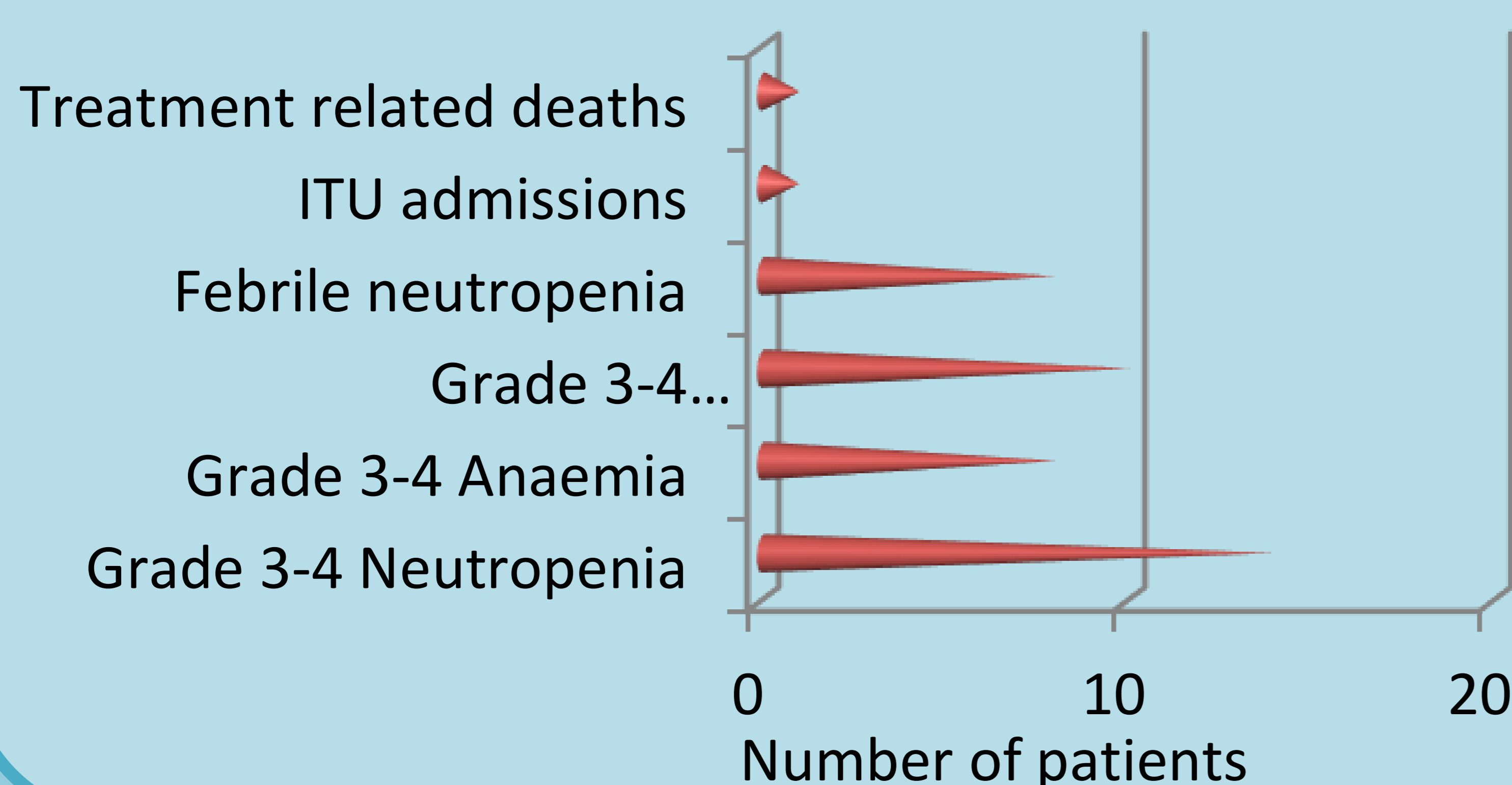
Lymphoma subsets



Progression free survival and overall survival



Toxicity of treatment



Conclusion

- **Better than expected overall survival 9 out of 14 patients alive compared to expected 50-60% at 2 years (vose et al)**
 - Superior results compared to previously documented R – CHOP
 - 1 treatment related mortality
- Supports local practice of IVE methotrexate + consolidation autologous stem cell transplant to selected patients with systemic T cell lymphoma