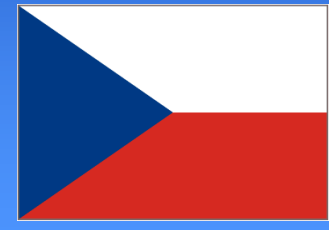
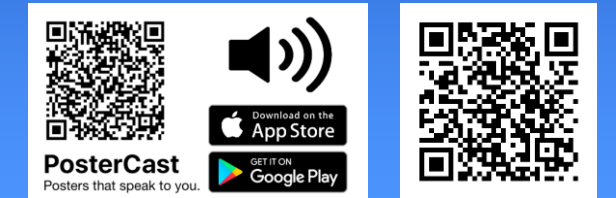


Early Progression after R-CHOP in Follicular Lymphoma: Key Role for the Maintenance Therapy



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Background

Follicular lymphoma (FL) is an indolent lymphoma with chronically relapsing disease course. Treatment of relapses with 2nd line regimens is considered successful, i.e. the relapse itself does not shorten life expectancy. However, **LymphoCare registry study** (Casulo C et al., JCO 2015) identified **early progression** of the disease within 24 months after R-CHOP (**POD24**) to be a strong unfavorable event. It is unclear whether post R-CHOP maintenance immunotherapy with **rituximab (MAINT)** decreases POD24 incidence. Potential predictors identifying patients at risk of POD24 have not been analyzed yet.

Aims

Aims: (1) To analyze the impact of MAINT on POD24 occurrence (2) to find clinically applicable predictors of POD24 at the time of FL diagnosis.

Specific endpoints

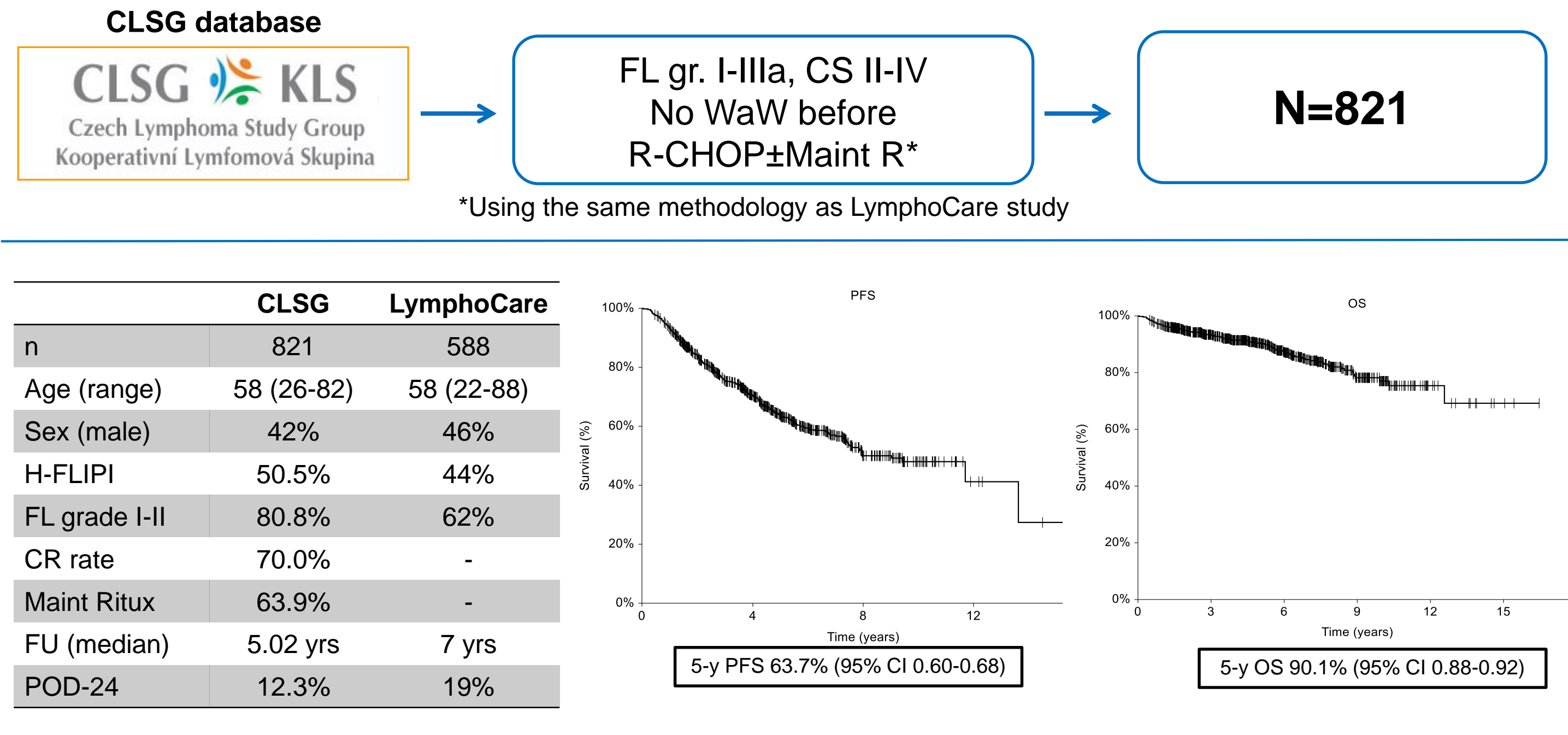
POD24

progression or relapse within 24 months after FL diagnosis.

rdOS (risk-defining event OS)

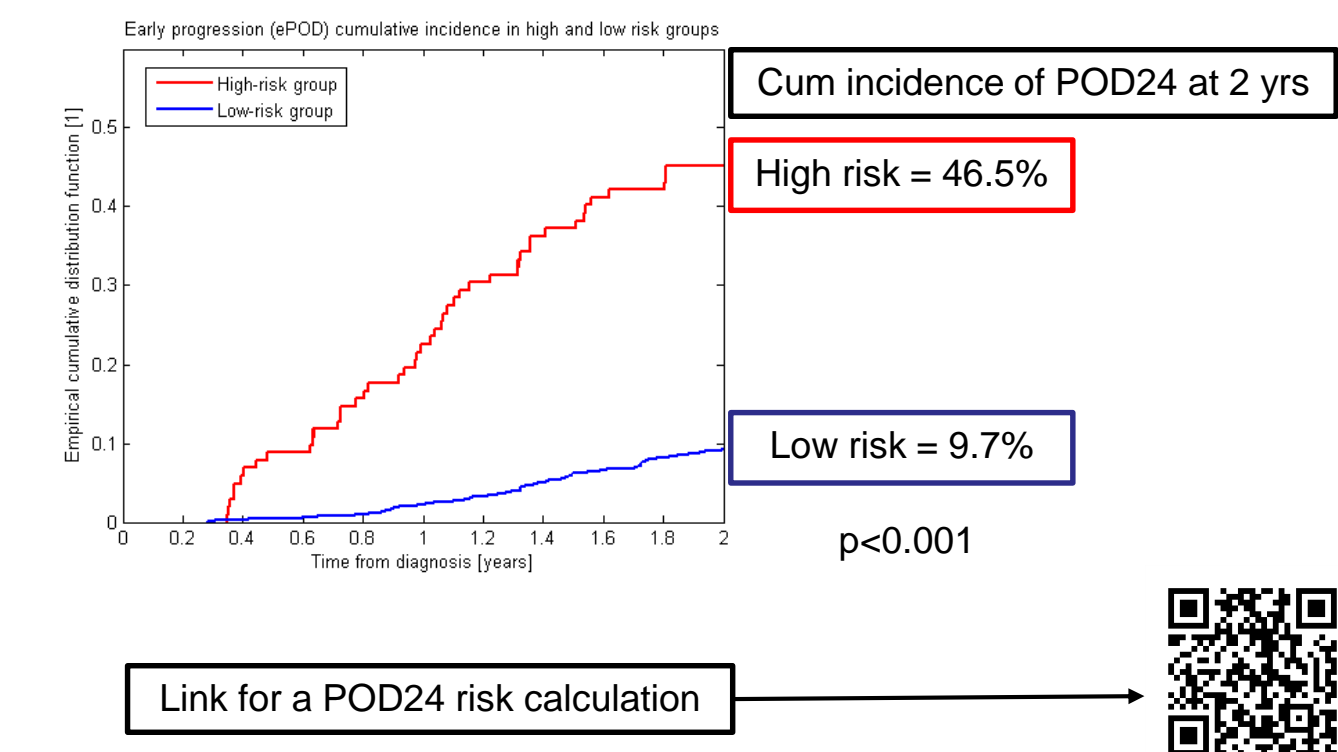
time from the date of early progression (POD24 group) or 24 months after diagnosis (non POD) to death of any cause.

Methods & Results



Predictive model

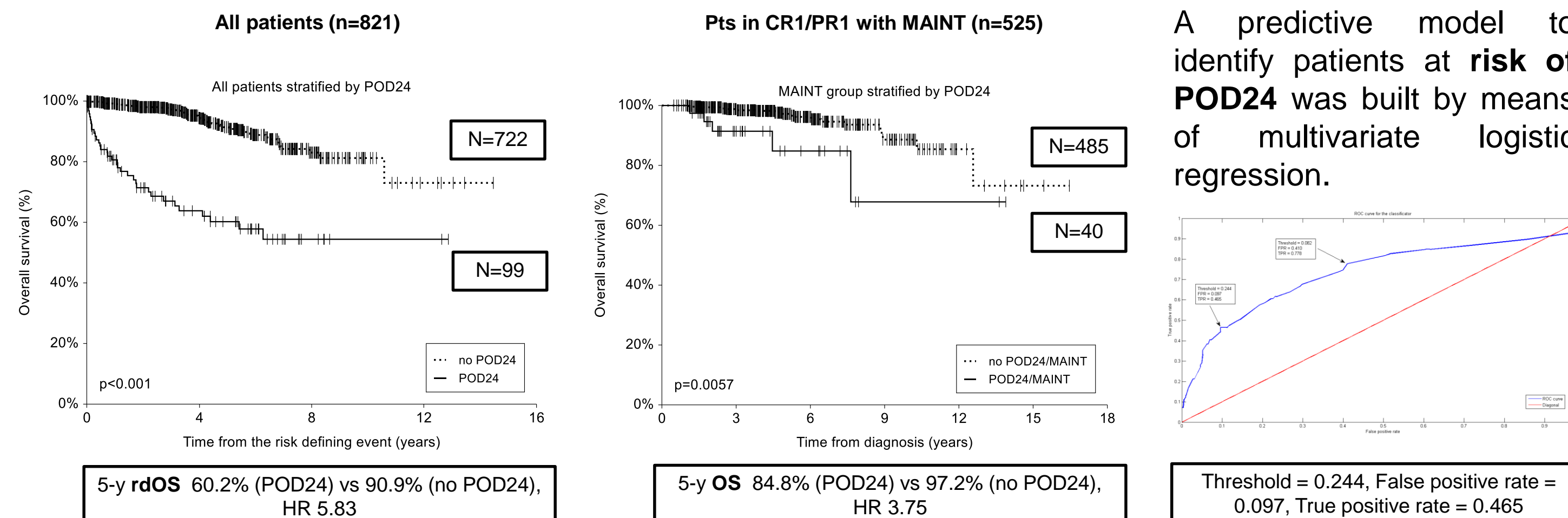
The final model included 6 variables: sex (male), CS IV, ECOG≥2, LDH>ULN, Leucocytes ≥10³/μL, and hemoglobin<12.0 g/dL.



Conclusion

In high-tumor burden FL patients, POD24 after R-CHOP is associated with almost **6 times higher risk of death**, with 5years rdOS only 60.2%. Pts who achieve CR/PR and receive rituximab maintenance and POD24 have still reduced OS probability (HR 3.75). On the other hand, pts on rituximab maintenance without early progression have extremely good prognosis with 97% probability to be alive at 5 years. We have proposed a **prediction system** to identify individuals at risk of POD24 who may profit from **alternative treatment modalities**.

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