

Long-Term Follow-up Analysis of HD2000 Trial Comparing ABVD Versus BEACOPP Versus Copp/EBV/CAD in Patients with Newly Diagnosed Advanced-Stage Hodgkin's Lymphoma: A Study from the Fondazione Italiana Linfomi

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Hi, I am Massimo Federico, professor of medical oncology at the University of Modena and Reggio Emilia in Italy and past-president of Fondazione Italiana Linfomi. I would like to comment on some of the longterm results of the study we conducted in Italy on behalf of Fondazione Italiana Linfomi comparing three different chemotherapy regimens for advanced Hodgkin lymphoma. We completed the study and published the early term results 5 years ago showing that BEACOPP escalated was superior to ABVD and CEC in terms of progression-free survival, but no benefit in terms of overall survival were documented so far. Now, with more than 5 additional years of followup with an average followup approaching 10 years, we updated the results of the study and we found that the difference in favor of BEACOPP escalated in terms of progression-free survival disappeared, mostly depending on the high incidence rate of late side effects in the BEACOPP arm. In fact, although in terms of disease control, BEACOPP continued to be superior to ABVD, in terms of long-term survival, the high rate of second malignancies reduced the benefit of initial treatment, so after median followup of 10 years, no difference at all in terms of overall survival has been observed. The conclusion we can offer to the discussion are that in the short run BEACOPP escalated continues to be superior to ABVD, but in terms of long-term survival no superiority emerged, so we have to continue to work and find new approaches for treating those patients that failed to respond if they start with ABVD or to avoid the long-term toxicity associated with BEACOPP. We hope that response-oriented treatment using interim PET could be of help for selecting those patients that are to be intensified or those who can deescalate after an excellent initial response. And we hope also to have new compounds, for example brentuximab vedotin, that I hope will be included in first-line therapy programs and then improving the complete remission rate and the longterm survival of patients with Hodgkin lymphoma. Thank you for your attention.

Abstract #499: Long-Term Follow-up Analysis of HD2000 Trial Comparing ABVD Versus BEACOPP Versus Copp/EBV/CAD in Patients with Newly Diagnosed Advanced-Stage Hodgkin's Lymphoma: A Study from the Fondazione Italiana Linfomi <a href="https://ash.confex.com/ash/2014/webprogram/Paper69190.html">https://ash.confex.com/ash/2014/webprogram/Paper69190.html</a>