

FULL TEXT LINKS

nature portfolio

Multicenter Study [Bone Marrow Transplant](#). 2020 Jan;55(1):117-125.

doi: 10.1038/s41409-019-0640-z. Epub 2019 Aug 21.

# Allogeneic stem cell transplantation improves survival in relapsed Hodgkin lymphoma patients achieving complete remission after salvage treatment

María Marta Rivas <sup>1</sup>, Mariano Berro <sup>2</sup>, María Virginia Prates <sup>3</sup>, Sebastián Yantorno <sup>3</sup>, Lorena Fiad <sup>3</sup>, Jorge Alberto Arbelbide <sup>4</sup>, Ana Lisa Basquiera <sup>4</sup>, Gonzalo Ariel Ferini <sup>4</sup>, Juan José García <sup>5</sup>, Pablo Andrés García <sup>5</sup>, Leandro Riera <sup>6</sup>, Gustavo Jarchum <sup>7</sup>, Alfredo Baso <sup>8</sup>, Juan Real <sup>9</sup>, Martín Castro <sup>4</sup>, Gregorio Jaimovich <sup>10</sup>, Juliana Martínez Rolón <sup>11</sup>, Cecilia Foncuberta <sup>12</sup>, Silvia Saba <sup>13</sup>, Gustavo Kusminsky <sup>2</sup>; GATMO (Grupo Argentino de Trasplante de Médula Ósea)

Affiliations

PMID: 31435033 DOI: [10.1038/s41409-019-0640-z](#)

## Abstract

Allogeneic stem cell transplant (alloSCT) is a current treatment option for patients with refractory/relapsed classic Hodgkin lymphoma (CHL), including those who have failed an autologous transplantation. We performed a retrospective multicenter analysis of 113 patients (median age 28 years; range 14-56; 54% males) with refractory/relapsed (R/R) CHL who had undergone alloSCT in Argentina. Kaplan-Meier was used to estimate overall (OS) and progression-free survival (PFS). Relapse rate (RR) and non-relapse mortality (NRM) were estimated with cumulative incidence analysis. Disease status at transplant was complete remission (CR) in 39%, partial remission (PR) in 44%, and stable/progressed disease (S/PD) in 17% of the patients. Donor type was matched related (MRD) in 60%, unrelated (URD) in 19%, and haploidentical (HID) in 21% of the patients. OS and PFS at 2 years were 43% and 27%, respectively, for all the cohort. In the univariate analysis, patients in CR showed better OS ( $p \leq 0.001$ ) and PFS ( $p \leq 0.001$ ), and lower NRM ( $p = 0.04$ ). HID had better PFS ( $p = 0.04$ ) and lower RR ( $p = 0.02$ ). In the multivariate analysis, CR showed a significant impact on OS and PFS, and HID on PFS. AlloSCT is a feasible procedure in patients with CHL. Those in CR at the time of the transplant had better outcomes. Haploidentical transplantation is associated with better PFS in these patients with poor prognosis.

[PubMed Disclaimer](#)

## Comment in

[Is this real life? Is this just fantasy? Decreased relapse following haploidentical transplant in Hodgkin's lymphoma with posttransplant cyclophosphamide.](#)

Mussetti A, Sureda A.

[Bone Marrow Transplant](#). 2020 Mar;55(3):483-484. doi: [10.1038/s41409-019-0754-3](#). Epub 2019 Nov 21.

PMID: 31754253 No abstract available.

## Related information

[MedGen](#)

## LinkOut - more resources

Full Text Sources

[Nature Publishing Group](#)

**Medical**

[Genetic Alliance](#)

[MedlinePlus Health Information](#)

**Research Materials**

[NCI CPTC Antibody Characterization Program](#)