EFFICACY AND SAFETY OF RITUXIMAB IN COMBINATION WITH CHEMOTHERAPY IN THE TREATMENT OF NON-HODGKIN`S LYMPHOMA

P. Castellano Copa[1], MA González López[2], P. Sempere Serrano[1], A. Iglesias Santamaría[1], C. Gonzalez Suarez[1], I. López Rodriguez[1], V.M. López García[1].
[1]Pharmacy Departament. Lucus Augusti Hospital.Lugo, Spain.
[2]Hematology Departament. Lucus Augusti Hospital.Lugo, Spain.

BACKGROUND

Chemotherapy, radiation and autologous bone marrow transplant conventional are standard therapies in Non-Hodgkin`s lymphoma (NHL). Nowdays the introduction of monoclonal antibodies, has enhanced the specificity of treatment, reducing the toxicity and presenting synergism with conventional chemotherapy.

OBJECTIVES

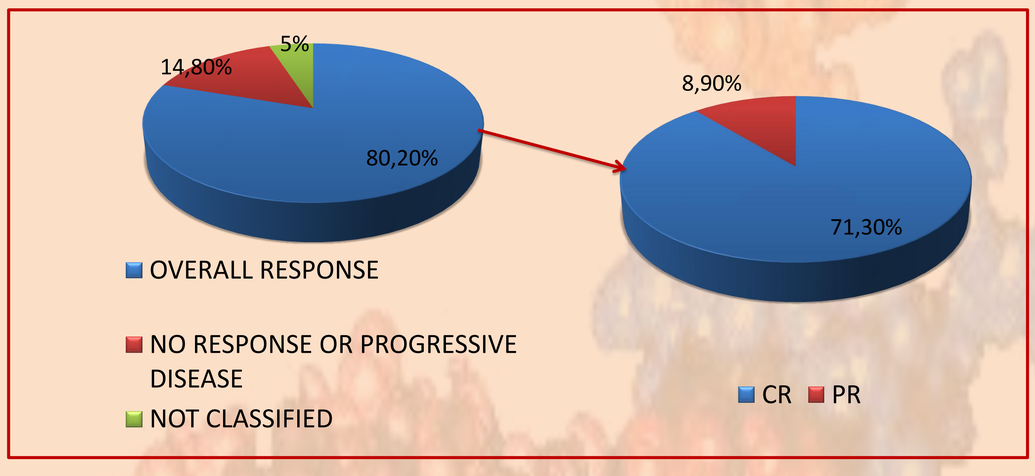
To compare data of rituximab efficacy and safety in combination with CHOP chemotherapy (cyclophosphamide, adriamycin, vincristine and prednisone) in the treatment of NHL, with those published in the literature.

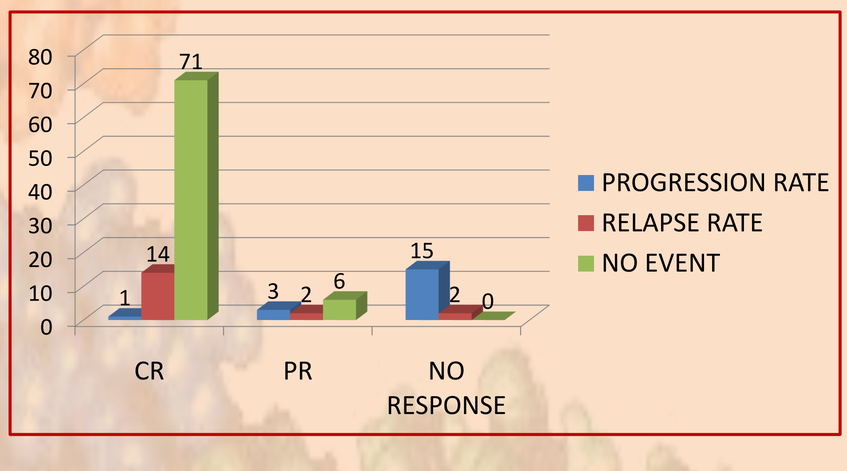
MATERIALS AND METHODS

Retrospective observational study of 116 patients diagnosed with NHL who had received chemotherapy with R-CHOP(rituximab-CHOP) between January 2005 and December 2010.
We reviewed the medical history (100 %) and the data were analyzed using SPSS predictive analytics software.
Demographic data (age, sex); efficacy [complete response (CR), partial response (PR), overall response rate (ORR), progression and relapse, overall survival (OS) and event free survival (EFS)]; toxicity (haematological and non haematological) were registred.

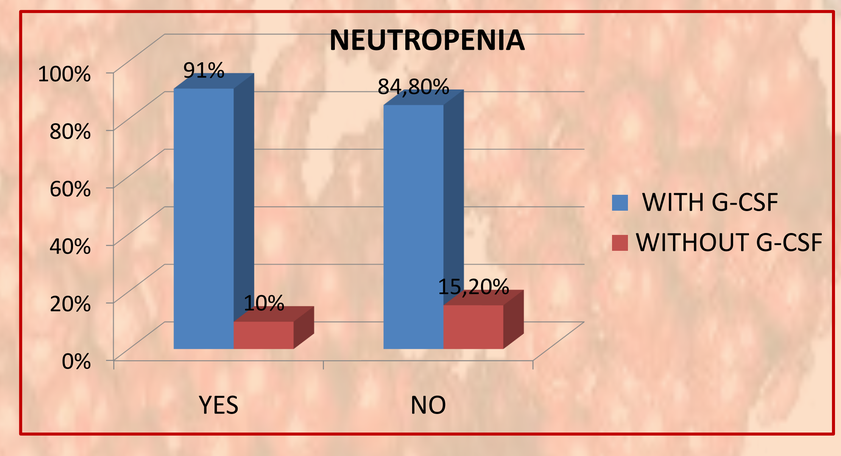
RESULTS

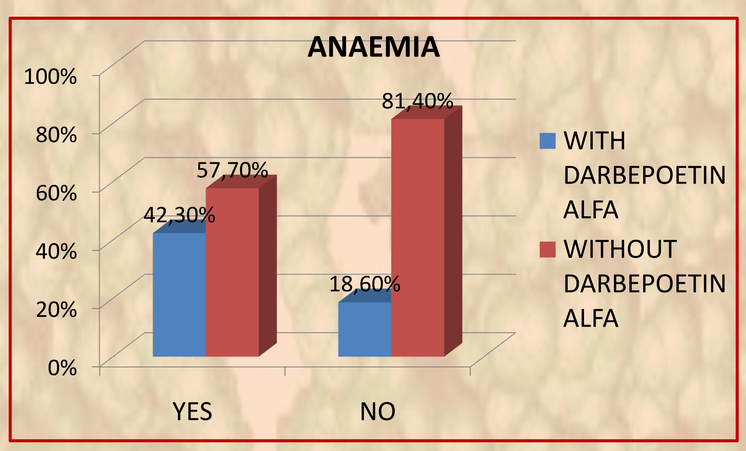
53.5% of patients were male and mean age at diagnosis was 59 years.





Projected median OS for responding patients was over 30 months and EFS after one year was 70.3%.
Neutropenia, anaemia and thrombocytopenia rates was reported in 15.8%, 12.4% and 2.3% respectively.





Infusion-related reaction were reported in 1.95% of patients, 72.2% during the first session.
The detected rate of infection was relatively low, and were microbiologically documented 3.5% of all infections.

CONCLUSIONS

The results obtained are comparable to published studies regarding the treatment arm with R-CHOP in patients randomized (study group GELA NHL-95.5, U.S. Intergroup Study, study Mabthera International Trial MINT). Neutropenia rates were higher than those found in the study of McLaughlin et al, while the other cell lines the results were similar.