Impact of treatment-related toxicity on outcome of HCV-positive diffuse large B-cell lymphoma in rituximab era

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Abstract:

Novelty and Impact: This first study compares the survival of HCV-positive DLBCL treated with and without rituximab which showed in toxicity and the outcome. Background: The effect of hepatitis C virus (HCV) infection on prognosis and hepatic toxicity in patients with diffuse large B-cell lymphoma (DLBCL) in the rituximab era is unclear. The treatment and the outcome of patients with DLBCL and HCV infection are still a matter of debate. Methods: We analyzed 137 DLBCL patients positive to HCV, treated with chemotherapy regimens include cyclophosphamide, doxorubicin, vincristine, and prednisone (CHOP) ± rituximab. Survival outcomes and hepatic toxicity were compared in DLBCL patients positive to HCV infection according to CHOP ± rituximab. Result: Our result showed that the group of patients treated with R-CHOP has significant high incidence of hepatic toxicity grade (3-4) (28 vs. 18%, P value 0.001) and worse progression-free survival (55 vs. 80%, P value 0.002) in comparison with the group treated with CHOP, and also there is significant difference between both groups in overall survival. This first study compares the survival of HCV-positive DLBCL treated with and without rituximab which showed significant differences. Conclusion: We conclude that HCV-positive patients with DLBCL treated with rituximab plus CHOP have high incidence in hepatic toxicity. Specific protocols evaluating antiviral therapy should be designed for these patients

Keywords:

HCV, Diffuse large B-cell lymphoma, Rituximab

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