

Interim PET in patients with Hodgkin Lymphoma Observational Study in Poland



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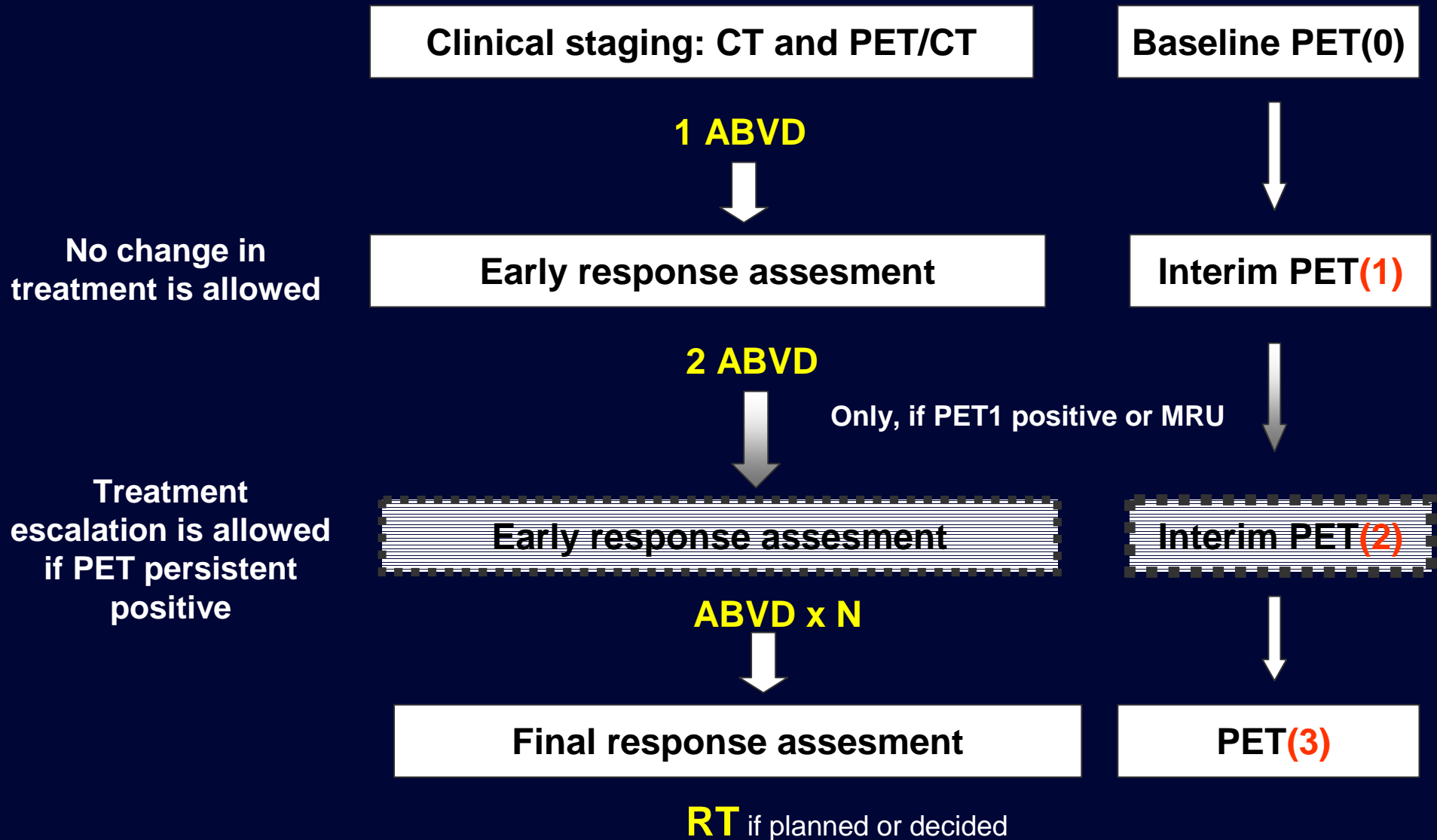
GOALS

- To validate prospectively the results of previously published studies of high negative and positive predictive value of interim PET in patients with Hodgkin lymphoma
- To answer whether interim PET scanning after 1st ABVD cycle is as good (better ?) as after 2nd cycle
- To test the hypothesis that interim PET criteria after ABVD chemotherapy for HL could be standardized (thanks to cooperation with the team of friends from Cuneo, Italy) and applied in any Polish center willing to utilize PET scanning for clinical decisions in the future - by creation a **Polish PET Network**)

Inclusion criteria

- Patients with Hodgkin lymphoma: early stage unfavorable (I-IIA with risk factors) and advanced stage (IIB-IV)
- >18 years old
- Karnofsky Performance Status >50%

Schema of the study



ABVD administration

- ABVD chemotherapy at least for the first 2 cycles will be given REGARDLESS of the results of WBC and ANC
- Growth factors will be administered at the discretion of primary physician
- RDI should be >90%

FDG-PET analysis

- Visual analysis with 5-point scale (London criteria) are used for PET interpretation
- Reference scale: **Mediastinum** (MBPS, *mediastinal blood pooled structures*) and **Liver**
- Collection of „raw” data (including SUVmax, pattern of uptake- focal or diffuse) not only **final** results: positive, MRU or negative
- Debatable images will be discussed by Polish-Italian Reviewers

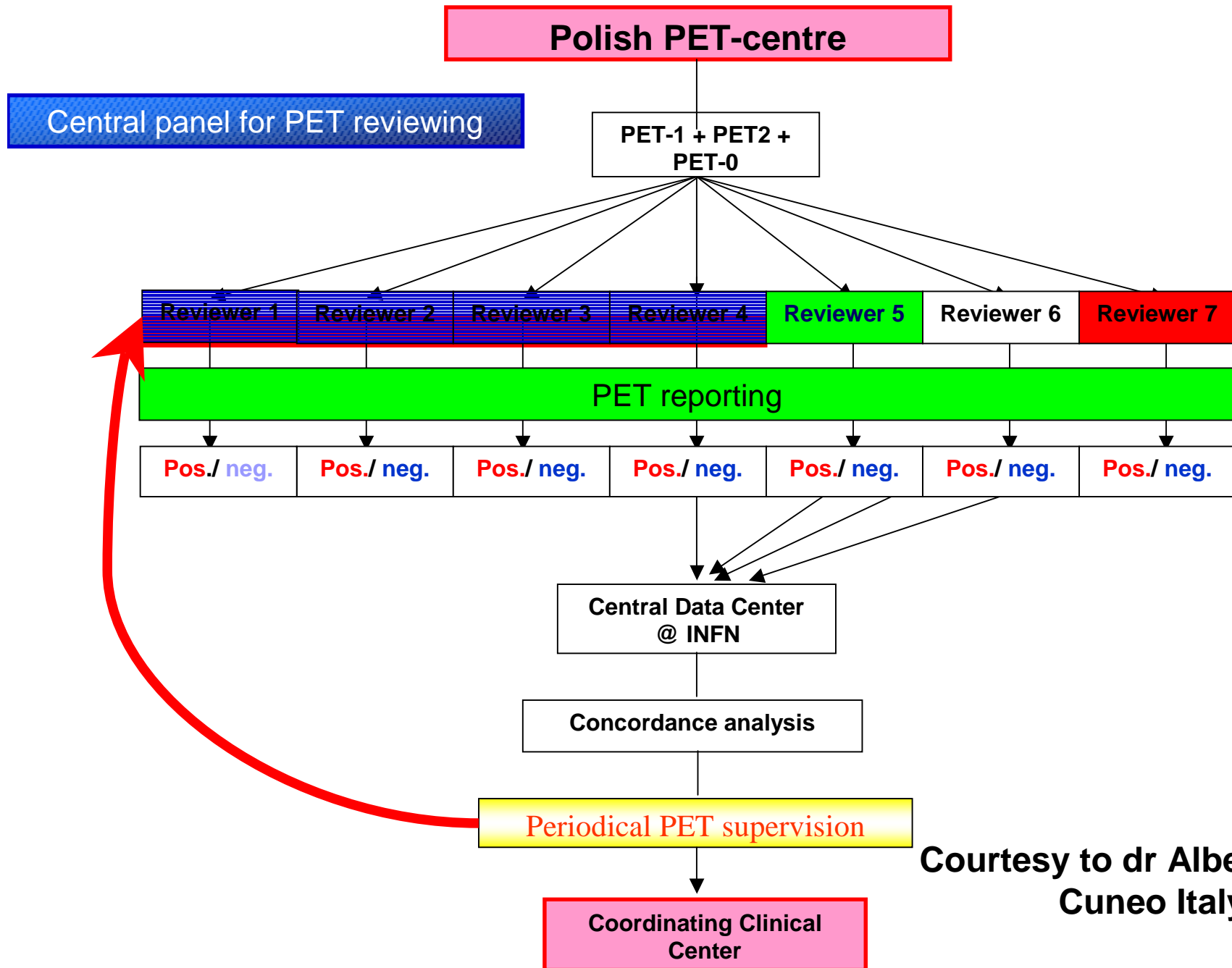
PARTICIPATING CENTERS: 13



ACTIVE CENTERS: 8

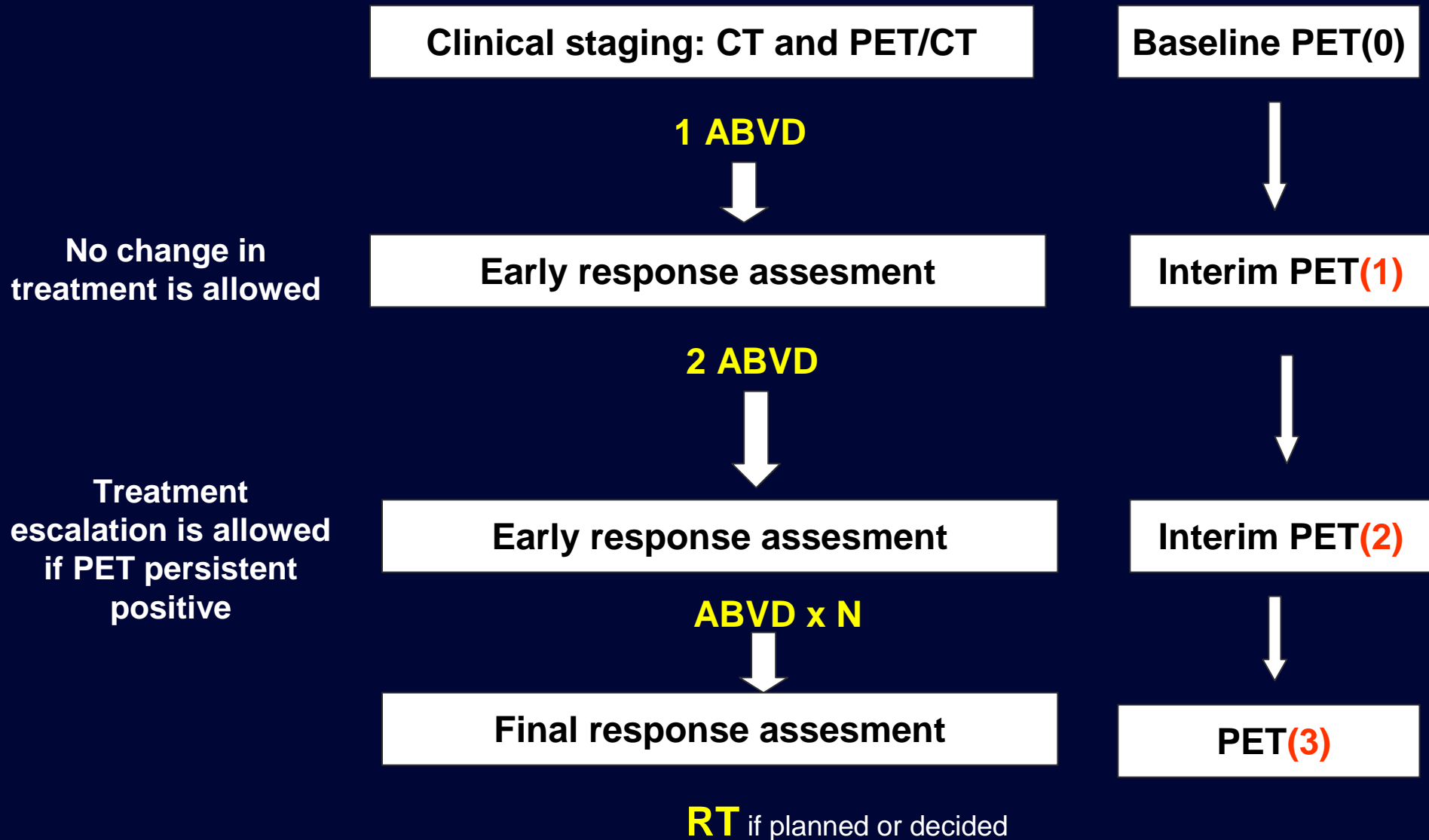
Early results

Center	Pts (#)	PET1 NEG(%)	PET1 MRU (%)	PET1 POS(%)
WROCL HEM	8	3	4	1
POZNAŃ HEM	5	3	1	1
W-WA CO	2	2	0	0
GDYNIA CO	37	15	12	10
ALL pts	52	23 (44)	17 (33)	12 (23)



Courtesy to dr Alberto Biggi
Cuneo Italy

Schema of the study in the Regional Oncology Center in Gdynia



Patients Characteristics (46pts)

Age Median (range) years	30 (21-70)	
Sex Female/Male (%/%)	22/24 (48/52)	
STAGE I-IIA No (%)	11	(24)
STAGE IIB-IV No (%)	35	(76)
IPS= 0-2 No	26	
IPS>2 No	9	

RESULTS Regional Oncology Center in Gdynia (46pts)

Interim PET	NEG (%)*	MRU (%)*	POS (%)*	MISSING	ALL
PET1	15 (41)	12 (32)	10 (27)	9	46
PET2	24 (65)	9 (24)	4 (11)	5	42

*- % of pts with PET done

Median follow-up: 11,9 (0,7-22,9) months

RESULTS Regional Oncology Center in Gdynia (46pts)

Interim PET	NEG (%)*	MRU (%)*	POS (%)*	MISSING	ALL
PET1	27 (73)		10 (27)	9	46
PET2	33 (89)		4 (11)	5	42 [#]

*- % of pts with PET done

#- 4pts awaiting PET2

PET1POS PATIENTS (10pts)

- 3 pts only PET1:

- 1 pt-no PET2, progression during treatment

- 2 pts PET2 awaiting PET2 (very early)

- 7pts PET2 done

- 2 pts PET2 positive

- 5 pts PET2 MRU/NEG

RESULTS Regional Oncology Center in Gdynia (28pts)

PET1	PET2	No		%
NEG	NEG	10	21	75
NEG	MRU	1		
MRU	NEG	10		
POS	NEG	3	5	18
POS	MRU	2		
POS	POS	2	2	7
NEG/MRU	POS	0	0	0

Median follow-up: 12,8 (0,8-22,9) months

PET1POS/PET2 NEG-MRU PATIENTS (5)

- 1 pt.(POS/MRU) active disease at final PET
- 1pt. (POS/NEG) completed RT, final PET negative, very short follow-up
- 3pts- continue ABVD chemotherapy

Summary

- PET1 positivity seems to happen more often (27%) compared to PET2 positivity (11%)
- PET1 negativity is a very strong predictor of PET2 negativity
- Too short follow-up for patients with PET1**POS**/PET2**NEG**/MRU