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Radiolabeled immunotherapy: setting new standards in NHL

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RADIO-LABELED IMMUNOTHERAPY: SETTING NEW STANDARDS IN NHL

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The use of radio-labeled antibody therapy in non-Hodgkin's lymphoma (NHL) is steadily growing in interest and importance. At this symposium, pertinent recent studies will be considered by a team of experts to offer a useful update to clinicians on the current and future role of radio-labeled immunotherapy in indolent and aggressive lymphoma.

Professor Martin Dreyling will provide an overview of the remarkable advances in response and survival outcomes in follicular lymphoma (FL) since the introduction of radio-labeled CD20-specific antibodies.¹ Specifically, two fascinating questions will be discussed against the background of recent study results: How can 'hot' monoclonal antibodies be integrated into clinical practice to optimize the management of our patients today? Will our current outlook on what constitutes the optimal treatment paradigm for FL be changed by the recent encouraging results in first-line consolidation?²

The rationale for radio-labeled antibody treatment in first-line consolidation will be explored by Professor Gilles Salles, who is set to discuss the key outcomes of the First-line Indolent Trial (FIT).² This phase III trial demonstrated that consolidation with radio-labeled antibody therapy in responders to first-line induction chemotherapy improved the quality of response – a recognized predictor of survival duration – and extended progression-free survival (PFS) beyond 2 years. In the consolidation arm patients achieved a PFS rate of 37 months compared with 13.5 months in the 'watch and wait' arm.²

The role of radio-labeled antibody treatment in patients with refractory or relapsed FL will be discussed by Professor Christian Gisselbrecht, who will look at novel therapeutic combinations with radio-labeled antibodies as conditioning regimens prior to autologous stem cell transplantation. These regimens build logically on the monotherapy efficacy and tolerability of radio-labeled antibody treatment in relapsed/refractory follicular or transformed lymphoma.^{3,4} In this context, an update from the ongoing phase II GELA trial, which is investigating pre-transplant conditioning with high-dose radio-labeled anti-CD20 antibodies plus BEAM (Z-BEAM)⁵ promises to be of special interest.

Efficacious treatment options for diffuse large B-cell lymphoma (DLBCL) leading to extended periods of disease-free survival have long remained an unmet clinical need. Relatively recently, immunochemotherapy with R-CHOP in high-risk patients has improved survival versus chemotherapy alone,⁶ while radio-labeled CD20-antibody therapy has elicited response rates of over 50% in refractory/relapsed DLBCL.⁷ The concept of consolidating the response to R-CHOP with radio-labeled CD20-antibody, as in the ZEAL trial investigating consolidation of first-line treatment,⁸ is currently exciting much interest. Professor Pier Luigi Zinzani will present data from several current trials involving consolidation with radio-labeled antibodies in DLBCL.

References

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