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Z-BeEAM (Ibritumomab tiuxetan, Bendamustine, Etoposide, Cytarabine, Melphalan) before autologous stem cell transplantation is safe and efficient for refractory large B-cell lymphoma

Magalie Tardy

Centre Antoine Lacassagne, France

Background: Refractory or relapsed large B-cells lymphoma are usually treated with a high dose chemotherapy regimen followed by an autologous stem cells transplantation. BEAM (carmustine, etoposide, cytarabine, melphalan) or more recently Z-BEAM (ibritumomab tiuxetan and BEAM) are commonly used regimens, but recently carmustine availability became difficult. The purpose of this study was to evaluate the feasibility and the safety of replacing carmustine by bendamustine in a new Z-BeEAM regimen (ibritumomab tiuxetan, bendamustine, etoposide, cytarabine, melphalan) prior to autologous stem cell transplantation.

Findings: This study was a retrospective analysis of six patients, with a median age of 60, treated by Z-BeEAM before autologous stem cell transplantation. We did not put in evidence any additional toxicities compared to conventional induction chemotherapy. The main toxicities were mucositis (3 grade III among 6 patients), gastrointestinal (2 grade III vomiting and 2 grade III diarrhea) and neutropenia (6 grade IV). Engraftment was successfully achieved for all patients. At the time of analysis of this study all patients were alive and in complete response based on the PET-CT evaluation.

Conclusions: BeEAM plus ibritumomab tiuxetan combined regimen before autologous stem cell transplantation is feasible and safe in aggressive relapsing large B-cell lymphoma.

Biography

Magalie Tardy holds a PhD in molecular and cellular physiology from University of Nice Sophia Antipolis. After completing her PhD, she is now completing her internship in medical oncology, at the department of oncology, center Antoine Lacassagne in Nice, France. She is interesting in hematology and more particularly in lymphoma and autologous stem cell transplantation.

magalie.tardy@gmail.com

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