

Radiation ups event-free, not overall survival in ped Hodgkin's

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For children with Hodgkin's lymphoma who respond to chemotherapy, treatment with low-dose involved-field radiation therapy improves event-free survival, but has no significant impact on overall survival, in long-term follow-up, according to a study published online May 29 in the *Journal of Clinical Oncology*.

(HealthDay) -- For children with Hodgkin's lymphoma who respond to chemotherapy, treatment with low-dose involved-field radiation therapy (IFRT) improves event-free survival (EFS), but has no significant impact on overall survival (OS), in long-term follow-up, according to a study published online May 29 in the *Journal of Clinical Oncology*.

Suzanne L. Wolden, M.D., from the Memorial Sloan-Kettering Cancer Center in New York City, and colleagues presented long-term follow-up data from the Children's Cancer Group trial of 826 <u>pediatric patients</u> with Hodgkin's lymphoma. Participants were enrolled from 1995 to 1998, and 498 who achieved an initial complete response to <u>chemotherapy</u> were randomly allocated to IFRT or no further treatment.



EFS and OS were assessed.

The researchers found that, for the entire cohort, the 10-year EFS and OS rates were 83.5 and 92.5 percent, respectively. For randomly-assigned patients in an as-treated analysis, the 10-year EFS was 91.2 percent for patients treated with IFRT, compared to 82.9 percent for patients with no further therapy (P = 0.004); the 10-year OS was 97.1 percent for IFRT and 95.9 percent for no further therapy (P = 0.50). Risk factors for inferior EFS included bulk disease, "B" symptoms, and nodular sclerosis histology.

"With a median follow-up of 7.7 years, IFRT produced a statistically significant improvement in EFS but no improvement in OS," the authors write. "Patient and disease characteristics and early response assessment will aid in deciding which patients are most likely to benefit from IFRT."

More information: Abstract

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Editorial

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