

## HIV status doesn't influence Hodgkin's lymphoma outcome

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Despite more extensive disease and more adverse prognostic factors, HIV-positive patients with Hodgkin's lymphoma do not have worse outcomes when treated with doxorubicin, bleomycin, vinblastine, and dacarbazine, according to research published online Oct. 8 in the *Journal of Clinical Oncology*.

(HealthDay)—Despite more extensive disease and more adverse prognostic factors, HIV-positive patients with Hodgkin's lymphoma (HL) do not have worse outcomes when treated with doxorubicin, bleomycin, vinblastine, and dacarbazine (ABVD), according to research published online Oct. 8 in the *Journal of Clinical Oncology*.

Silvia Montoto, M.D., of the Queen Mary University of London, and colleagues conducted a study involving 224 patients with newly diagnosed HL, of whom 93 were HIV positive, who were treated with ABVD. The HIV-positive patients had more highrisk disease; 47 had CD4 counts below 200/µL and 92 received highly active antiretroviral therapy (HAART) during chemotherapy.

The researchers found that the complete response rate was not significantly different for HIV-positive and HIV-negative patients (74 and 79 percent, respectively). After a median follow-up of 60 months, 16 HIV-negative and seven HIV-positive patients had relapsed at a median of six months. Neither the five-year event-free survival rate (59

and 66 percent for positive and negative patients, respectively) nor the five-year overall survival rate (81 and 88 percent for positive and negative patients, respectively) were significantly different.

"In summary, this study consolidates the increasingly prevalent notion that, in the current HAART era, patients with HIV and lymphoma should be treated with the same protocols used in HIV-negative patients," the authors write. "As a corollary, HIV status should be removed from the exclusion criteria for entry onto clinical trials."

Several authors disclosed <u>financial ties</u> to the pharmaceutical industry.

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