

PFS up with obinutuzumab-based Tx in follicular lymphoma

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(HealthDay)—For patients with follicular lymphoma, obinutuzumab-based immunochemotherapy is associated with longer progression-free survival than rituximab-based therapy, according to a study published online Oct. 4 in the *New England Journal of Medicine*.

Robert Marcus, M.B.B.S., from King's College Hospital in the United Kingdom, and colleagues randomized 1,202 patients with [follicular lymphoma](#) to undergo induction treatment with obinutuzumab-based [chemotherapy](#) or rituximab-based chemotherapy (601 patients in each group). Patients who responded to treatment received maintenance treatment with the same antibody that they had received in induction for up to two years.

In a planned interim analysis conducted after a median follow-up of 34.5 months, the researchers found that obinutuzumab-based chemotherapy resulted in a significantly lower risk of progression, relapse, or death than rituximab-based chemotherapy (estimated three-year rate of progression-free survival, 80 versus 73.3 percent; hazard ratio for progression, relapse, or death, 0.66). The results were similar for independently reviewed progression-free survival and other time-to-event end points. The groups had similar response rates (88.5 and 86.9 percent in the obinutuzumab and rituximab groups, respectively). The obinutuzumab group had more frequent adverse events of grade 3 to 5 than the rituximab group (74.6 versus 67.8 percent), as well as more frequent serious adverse events (46.1 versus 39.9 percent).

"The replacement of rituximab with obinutuzumab in the context of immunochemotherapy and maintenance therapy in [patients](#) with previously untreated follicular lymphoma resulted in significantly longer progression-free survival," the authors write.

Several authors disclosed financial ties to pharmaceutical companies, including F. Hoffman-La Roche, which funded the study.

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