DEVELOPMENT OF HIGH-GRADE NON-HODGKIN LYMPHOMA IN FOLLOW – UP OF A HODGKIN LYMPHOMA PATIENT AND OBTAINING COMPLETE REMISSION BY R-ICE CHEMOTHERAPY: CASE REPORT

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Introduction - Purpose: Hodgkin lymphomas are seen in early ages and clinically indolent. Transformation between Hodgkin lymphoma and non-Hodgkin lymphoma is not fully understood. Treatment of transformed high-grade non-Hodgkin lymphoma is difficult. In these patients, main treatment options are as follows: anthracycline-based induction therapy, platinum-based consolidation therapy, stem cell collection followed by BEAM and autologous bone marrow transplantation (ABMT).

Findings: Hodgkin lymphoma diagnosed patient had received 8 cycles of MOPP plus ABVD chemotherapy in 1993 and had been followed up as complete remission until the patient was diagnosed with recurrent high grade diffuse large cell lymphoma in May 2014. 6 cycles of R-CHOP and 2 cycles of rituximab were administered and complete remission was obtained. In October 2016, patient diagnosed as relapsed non-Hodgkin lymphoma and 2 cycles of rituximab – ifosfamide + carboplatin + etoposide (R-ICE) chemotherapy was administered. In the PET/CT scan performed after chemotherapy protocol, patient was in complete remission and BEAM protocol followed by ABMT was performed.

Discussion: Hodgkin transformed Non- Hodgkin lymphoma cases are more aggressive. Although such cases are even more rare, remission can be achieved with conventional treatments. Due to more frequent recurrence risk, patients should be followed up more closely. Prior to intensive dose chemotherapy and ABMT approach, remission induction could be obtained.

Keywords: High-grade non-Hodgkin lymphoma, autologous bone marrow transplantation