

Il y a quelques années, votre patient a développé un lymphome folliculaire et a été traité dans le cadre de l'étude SAKK 35/03.

Le patient a appris dans le journal la présentation de l'étude au congrès d'oncologie de Chicago en 2015. Il vous consulte pour cette raison car il aimerait discuter des résultats et des conséquences éventuelles pour son traitement. La sélection aléatoire de l'étude avait affecté votre patient au groupe de traitement court.

Un extrait de la publication en langue anglaise est joint.

Ihr Patient ist vor einigen Jahren an einem follikulären Lymphom erkrankt und wurde im Rahmen der SAKK 35/03-Studie behandelt.

Der Patient hat aus der Zeitung vernommen, dass die Studie am Onkologenkongress 2015 in Chicago vorgestellt wurde. Er meldet sich deshalb bei Ihnen und möchte die Resultate und die möglichen Konsequenzen für seine Behandlung mit Ihnen diskutieren. Ihr Patient wurde damals in den kurzen Behandlungsarm randomisiert.

Auszug aus der Publikation in englischer Sprache beiliegend.

Alcuni anni fa il Suo paziente è stato affetto da linfoma follicolare ed è stato trattato nell'ambito dello studio SAKK 35/03.

Il paziente ha letto sul giornale che lo studio è stato presentato al congresso di oncologia 2015 a Chicago. Pertanto si presenta da Lei e desidera discutere con Lei i risultati e le possibili conseguenze per il Suo trattamento. All'epoca il Suo paziente era stato randomizzato nel braccio di trattamento breve.

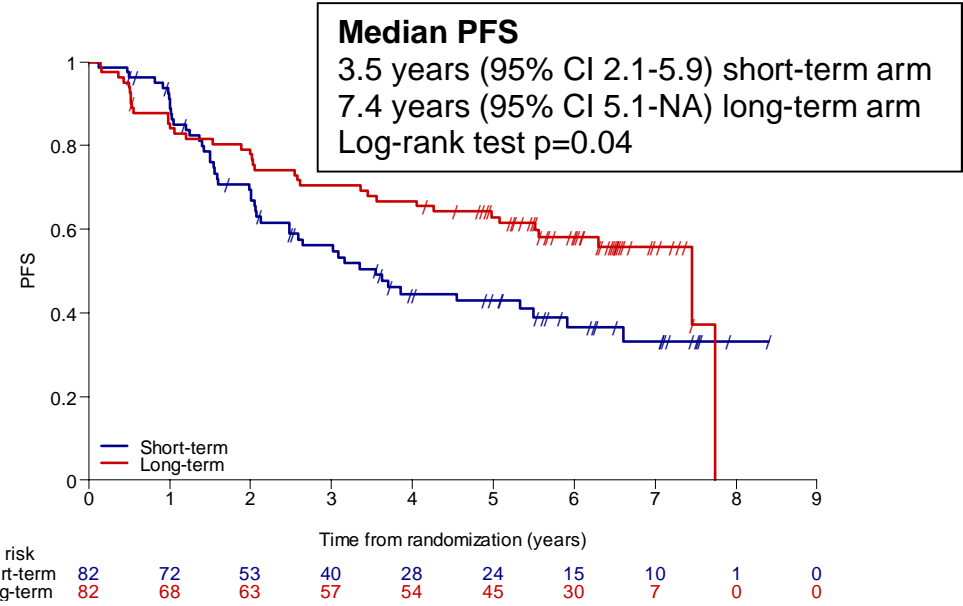
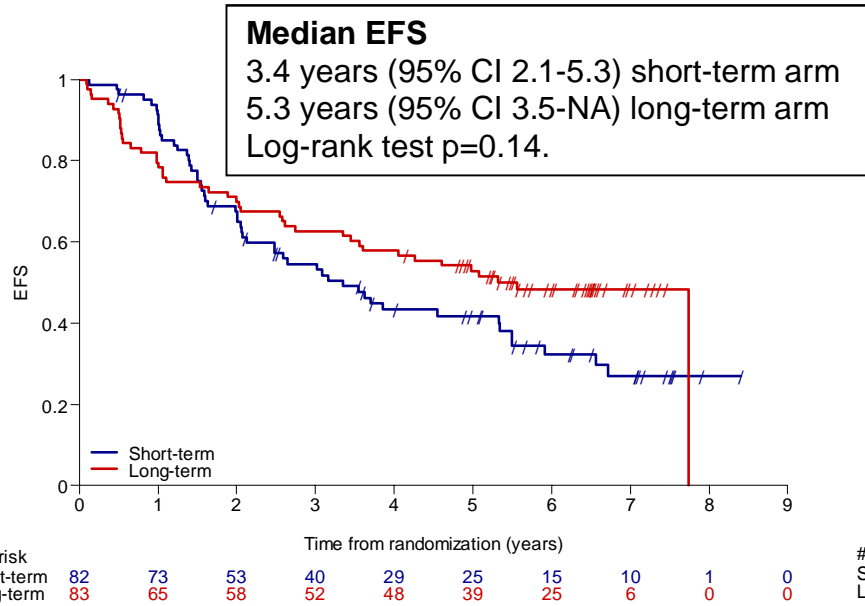
Estratto dalla pubblicazione in lingua inglese accluso.

Addendum to short case 3

Study: Patients and Methods

Rituximab maintenance was shown to be effective in patients with follicular lymphoma. However, the optimal duration of maintenance treatment remains unknown.

A total of 270 patients with either untreated, relapsed, stable or chemotherapy resistant follicular lymphoma were treated with 4 weekly doses of rituximab monotherapy (375 mg/m²). Patients achieving at a least a partial response were randomized to receive maintenance with one infusion of rituximab every two months either on a short-term schedule (four administrations) or a long-term schedule (maximum of five years or until disease progression or unacceptable toxicity). The primary endpoint was event-free survival (EFS). Progression-free survival (PFS), overall survival (OS) and toxicity were secondary endpoints.



Statistical assumptions:

Based on a previous trial with short-term rituximab maintenance in follicular lymphoma.

Sample size calculation allowed detecting a median EFS increase with long-term maintenance from 2.5 to 4.5 years with 80% power and an overall two-sided type I error probability of 5%.

