

NEW DATA ON T-CELL AND OTHER LYMPHOMAS

Y. Song, Beijing (China), et al.

[20-YEAR SURVIVAL DATA ANALYSIS OF PTCL PATIENTS IN PEKING UNIVERSITY CANCER HOSPITAL](#)

Authors Conclusion from the abstract: According to our experiences, CHOP regimen improved the efficacy and survival of PTCLs in front-line; addition of gemcitabine resulted in more adverse events without benefit of survival. Patients with AITL and advanced-stage NKTCL who achieved CR after first-line therapy should be recommended to receive HDT/ASCT.

O.A. O'Connor, New York, NY (USA), et al.

[DEVELOPING IMMUNOEPIGENETIC PLATFORMS FOR PTCL: LEVERAGING A LOGIC FOR PD1/PDL-1 INHIBITORS](#)

Authors Conclusion from the abstract: These data confirm the findings in the preclinical studies, suggesting these unique, non - chemotherapy based combinations exhibit a selectivity in one lineage of lymphoma over another.

H. Huang, Guangzhou (China), et al.

[CLINICAL OUTCOME OF AN PROSPECTIVE, MULTICENTRE, RANDOMIZED, PHASE III NON-INFERIORITY CLINICAL TRIAL FOR PATIENTS WITH EXTRANODAL NK/T CELL LYMPHOMA TREATED BY P-GEMOX OR ASPAMETDEX](#)

Authors Conclusion from the abstract: Induction chemotherapy of both P-Gemox+Thalidomide and AspaMetDex regimen followed by EIFRT yielded promising efficacy for patients with stage I/II ENKTL. There is little difference in response and survival between the two regimens. For advanced or relapsed patients, both regimen showed unsatisfied survival outcome. Meanwhile, P-Gemox+ Thalidomide was less toxic with more convenient administration in outpatients' clinics in comparison to AspaMetDex. ([ClinicalTrials.gov](#), NCT 2085655).

L. de Leval, Lausanne (Switzerland), et al.

[NEW DATA IN THE MOLECULAR PATHOLOGY OF T CELL LYMPHOMAS](#)

Authors Conclusion from the abstract: The GATA3 (TH2) and TBX2 (TH1) subgroups of PTCL-not otherwise specified defined by specific molecular signatures, are associated with different copy abnormalities and oncogenic pathways, indicating distinct oncogenic evolution.

W. Zhao, Shanghai (China), et al.

[DIFFUSE LARGE B-CELL LYMPHOMA: USING IMMUNE BIOMARKERS TO DEFINE NOVEL THERAPIES](#)

Authors Conclusion from the abstract: Together, immune dysregulation plays an important role on disease progression and may become potential therapeutic targets. Further mechanism study is helpful for the identification of biological subsets sensitive to immunotherapy and eventually to realize precision treatment in DLBCL.

M. Federico, Modena (Italy), et al.

[THE RELEVANCE OF OBSERVATIONAL REGISTRIES: THE CASE OF T CELL LYMPHOMA PROJECTS 1.0 AND 2.0](#)

Authors Conclusion from the abstract: A final accrual of 1,000 cases has been planned. At present, 60 Institutions from 18 different countries already joined the project. So far, 151 patients have been registered by 25 active sites, 34% of whom with diagnosis of PTCL-NOS.