

BHS 2014

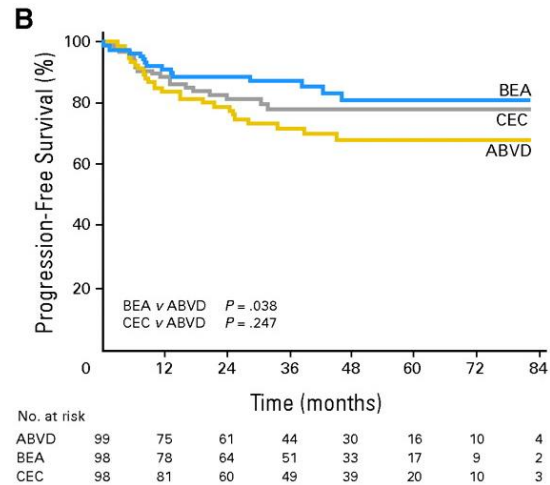
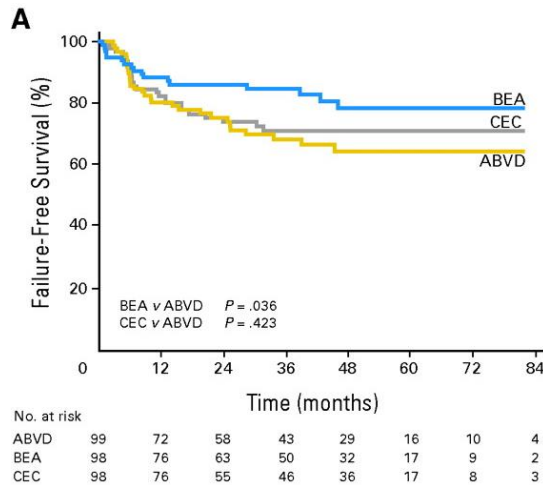
Marc ANDRE



Main message

« BEACOPP is associated with a significantly improved PFS compared with ABVD »

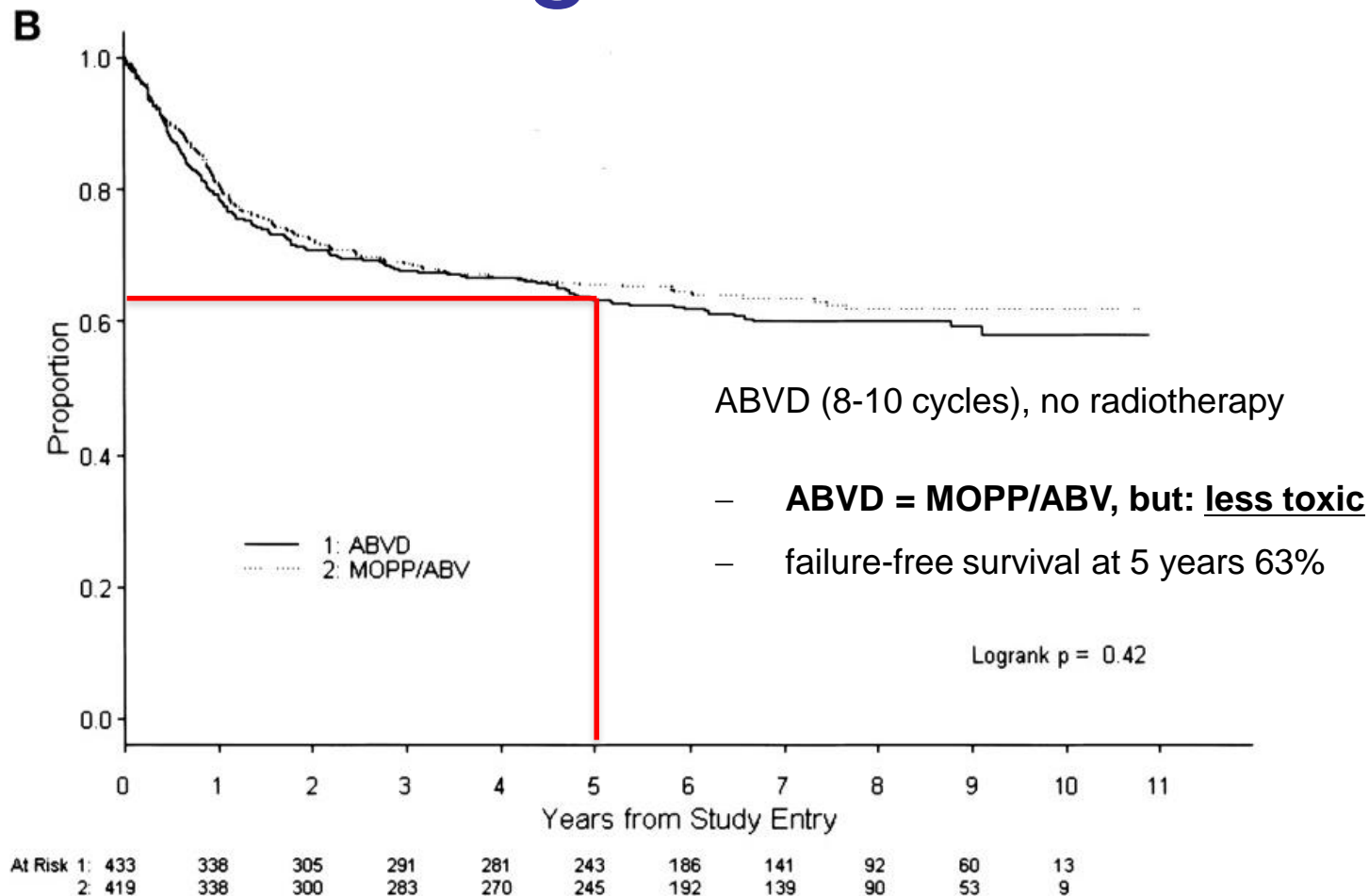
Federico M et al. JCO 2009;27:805-811



Main message

- More toxicity
- Better survival with BEACOPP

Why is ABVD gold-standard ?



Do we have a second shot ?

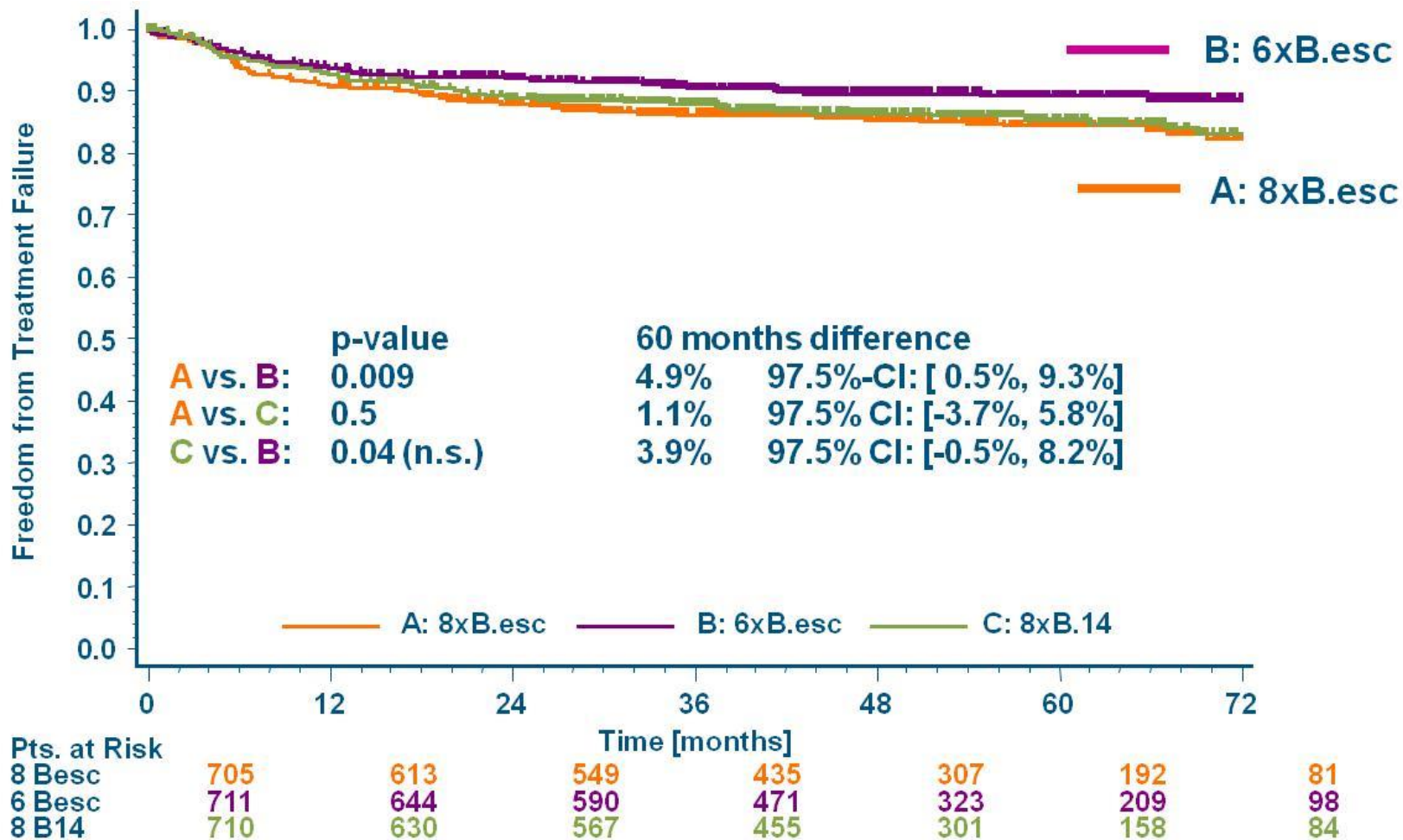
| | | | |
|-----------------------------|------------|--------------------------------|-----|
| BNLI (Linch et al, 1993) | – BEAM | EFS @ <u>3</u> <u>years</u> | 53% |
| HDR1 (al, 2005) | VP16, BEAM | <u>years</u> | 59% |

only ~ 50% of our relapsing patients will be cured by high-dose chemotherapy and PBSCT, i.e. PFS differences should translate into OS differences!

ABVD vs escBEACOPP: efficacy

| Study | Group | n | 5-y PFS | Difference (%) | p | 5-y OS | Difference (%) |
|---------------------|----------------------------|-----|---------|----------------|--------|--------|----------------|
| HD 2000 | ABVD | 99 | 68 | 13 | 0.038 | 84 | 8 |
| | BEACOPP (4 esc + 2 std) | 98 | 81 | | | 92 | |
| IIL | ABVD | 168 | 73 | 12 | 0.004 | 84 | 5 |
| | BEACOPP (4 esc + 4 std) | 163 | 85 | | | 89 | |
| IG 20012 IPS 3-7 | ABVD | 275 | 69 | 15 | 0.0003 | 86,7 | 4.5 |
| | BEACOPP (4 esc + 4 std) | 274 | 84 | | | 90,3 | |
| LYSA H34 IPS 0-2 | ABVD | 77 | 75 | 18 | 0.008 | 92 | 7 |
| | BEACOPP (4 esc + 4 std) | 68 | 93 | | | 99 | |

HD15: 6 or 8 cycles BEACOPPesc?



ABVD vs BEACOPP: toxicities

| Study | Group | n | TRM (%) | sAML/MDS (%) | Second neoplasia n (%) |
|---------------------|----------------------------|-----|---------|--------------|------------------------|
| HD 2000 | ABVD | 99 | n.r. | 0 | 1 (1) |
| | BEACOPP (4 esc + 2 std) | 98 | n.r. | 0 | 1 (1) |
| IIL | ABVD | 168 | 1 | 1 | 3 (7.7) |
| | BEACOPP (4 esc + 4 std) | 163 | 3 | 1 | 1 (0.6) |
| IG 20012 | ABVD | 275 | 3.3 | 0.7 | 8 (2.9) |
| IPS 3-7 | BEACOPP (4 esc + 4 std) | 274 | 2.2 | 1.5 | 10 (3.7) |
| LYSA H34 IPS 0-2 | ABVD | 77 | 0 | 0 | 5 (6.5) |
| | BEACOPP (4 esc + 4 std) | 68 | 0 | 0 | 1 (1.5) |

BEACOPP: toxicities

- **BEACOPPesc for < 60 years**
- **Growth factor is mandatory**
- **Used in developed health care system**
- **No evidence for more late malignancies**

Do we have a survival difference?

The NEW ENGLAND JOURNAL of MEDICINE

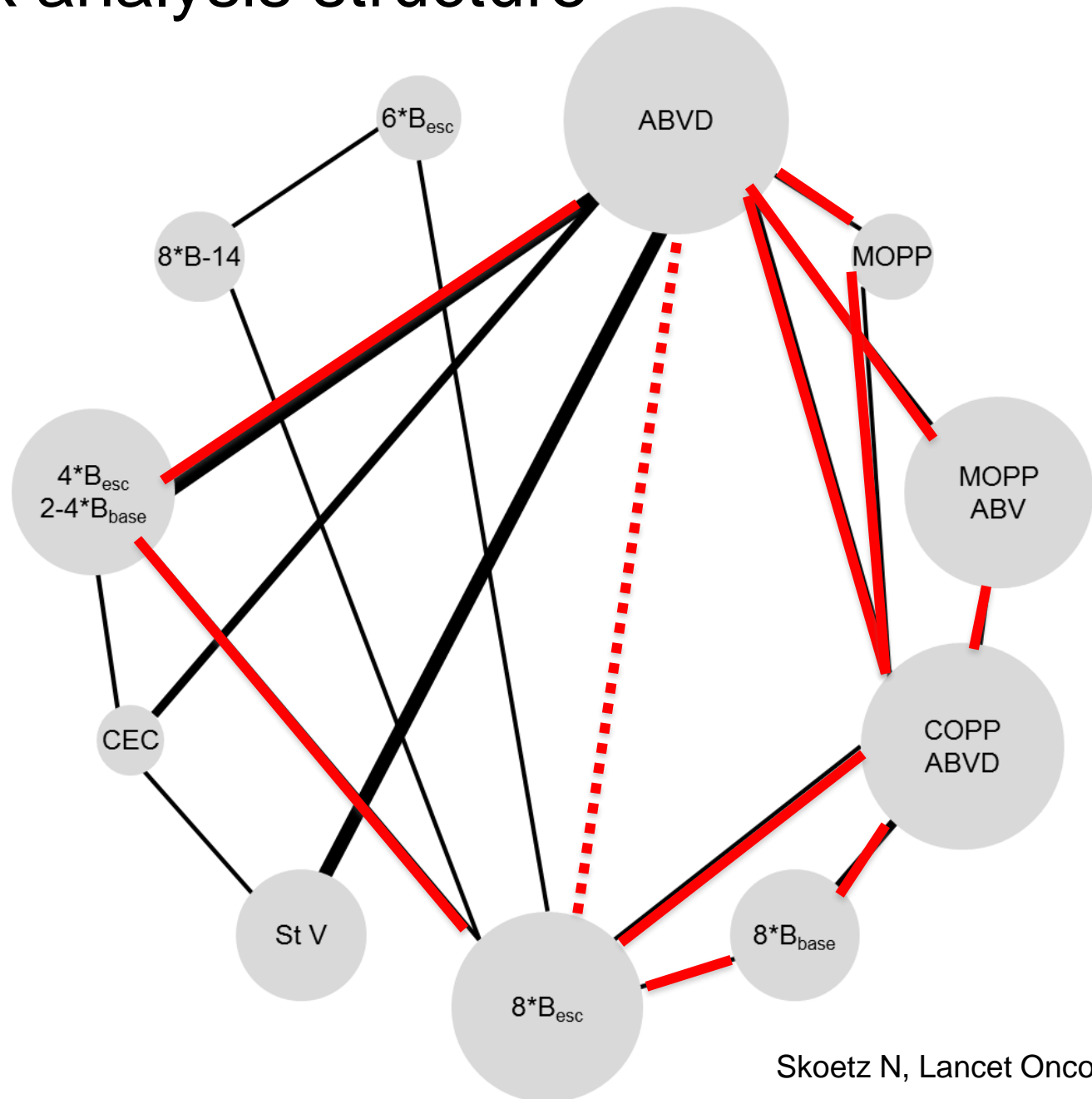
ORIGINAL ARTICLE

ABVD versus BEACOPP for Hodgkin's Lymphoma
When High-Dose Salvage Is Planned

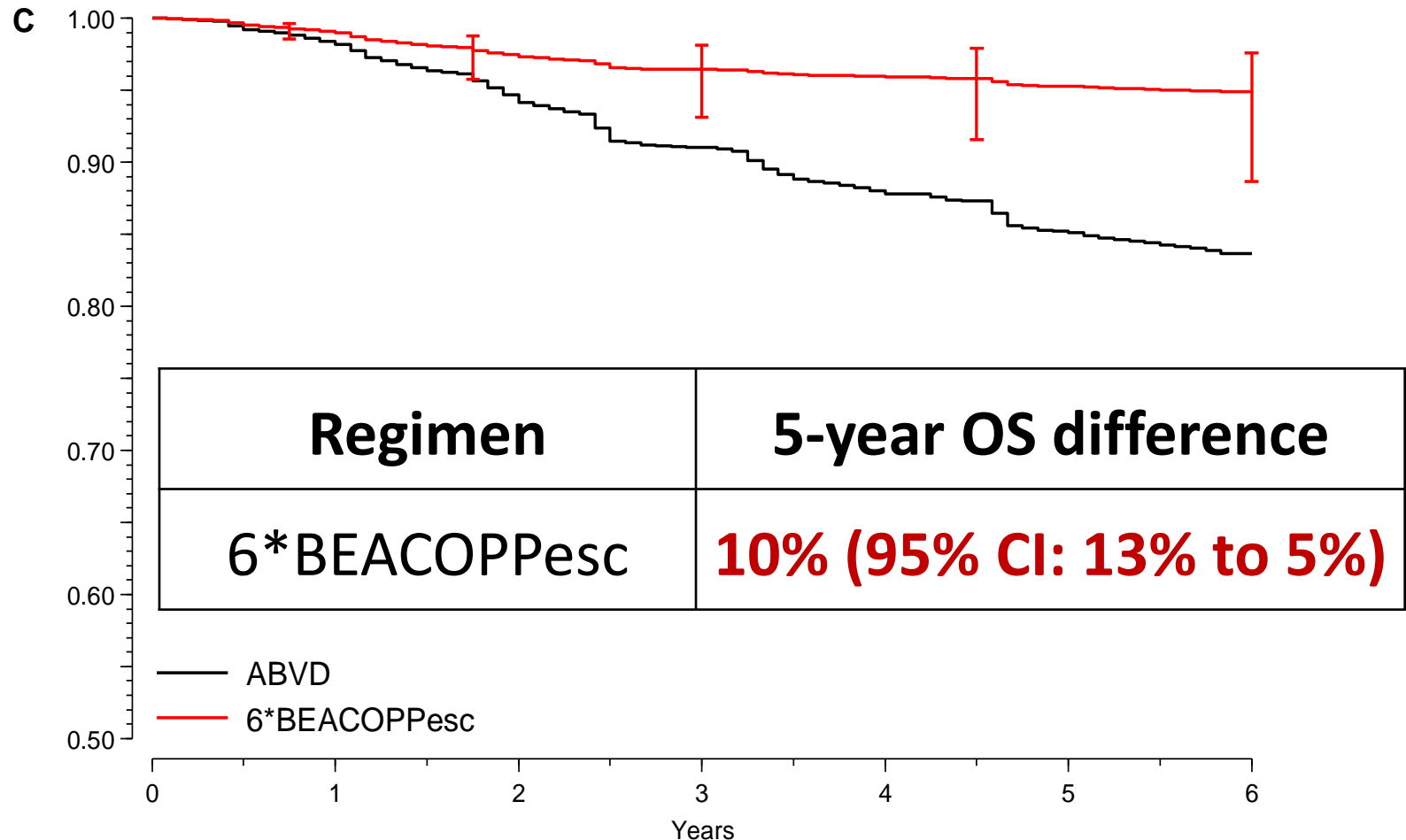
Viviani S. et al, July 21, 2011

Absence of evidence is not evidence of absence !

Network analysis structure



Reconstructed individual OS: ABVD versus 6* BEACOPP_{esc}



Review

- ABVD cures 65 -75% of patients
- BEACOPP is superior to ABVD



Conclusions

- New drugs and strategies are coming
- BEACOPP today is superior to ABVD



| Weakness | Meaning |
|--|--|
| Limited number of regimens (11) and trials (14) | Data are consistent, models fit well, heterogeneity is low |
| Data is definitely too sparse to reach firm conclusions regarding safety | TRM and SM have no major influence on OS within the observation time |
| definition of “advanced stages” vary across trials | ABVD trials included many more stage I and II HL patients |
| Results might apply only to settings with a well developed health care system | True for all regimens, but likely to be more relevant for BEACOPP |