

# ASCO ANSWERS

## NON-HODGKIN LYMPHOMA

### WHAT IS NON-HODGKIN LYMPHOMA?

Non-Hodgkin lymphoma (NHL) is a disease of the lymph system, in which lymphatic cells begin to change, grow uncontrollably, and form tumors. NHL can be indolent (slower growing), aggressive (faster growing), or have features of both types. B-cell lymphoma is the most common type of NHL; T-cell lymphoma is less common. Because of the many types and subtypes of NHL, it is important to know the diagnosis. More information about subtypes can be found at [www.cancer.net/nhl](http://www.cancer.net/nhl).

### WHAT IS THE FUNCTION OF THE LYMPH SYSTEM?

The lymph system consists of thin tubes that branch out to all parts of the body. It carries lymph, a clear fluid containing lymphocytes (white blood cells), to fight infection and disease. Lymph collects in lymph nodes. Because lymph tissue is found in so many parts of the body, NHL can start almost anywhere.

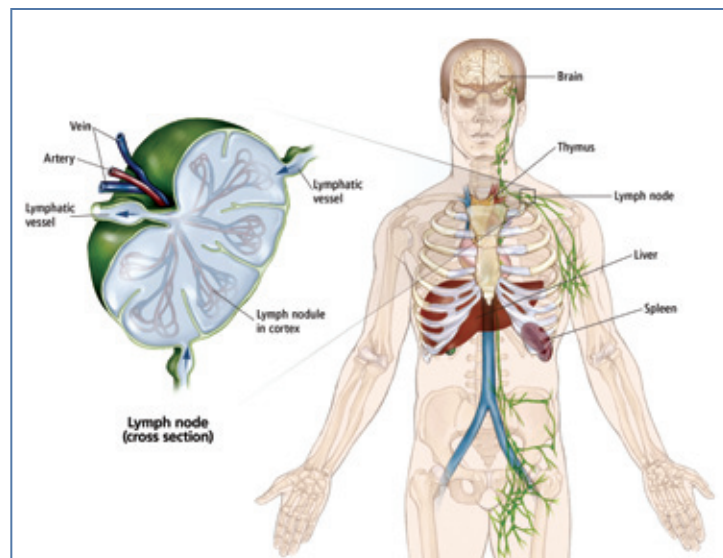


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*Find additional cancer information at [www.cancer.net](http://www.cancer.net).*

### WHAT DOES STAGE MEAN?

Staging is a way of describing the extent of a cancer, such as where it is located, if or where it has spread, and if it is affecting the functions of other organs in the body. There are four stages for NHL: stages I through IV (one through four). A scale called the International Prognostic Index (IPI) is used to help predict the success of treatment. Descriptions of these stages are available at [www.cancer.net/nhl](http://www.cancer.net/nhl).

### HOW IS NON-HODGKIN LYMPHOMA TREATED?

The treatment of NHL depends on the type of lymphoma, the stage, and the person's overall health. Active surveillance (watchful waiting) may be appropriate for some patients with indolent lymphoma who are otherwise well and do not have any symptoms of lymphoma. Chemotherapy is often the primary treatment for NHL. Radiation therapy is sometimes given after or during chemotherapy for patients with an early-stage tumor or a particularly large lymph node. Other treatment options include the monoclonal antibody, rituximab (Rituxan), which may be given with chemotherapy to treat many types of B-cell lymphoma and radiolabeled antibodies (also called radioimmunotherapy). Stem cell transplantation may be used for patients with NHL. When making treatment decisions, people may also consider a clinical trial; talk with your doctor about all treatment options. The side effects of NHL treatment can often be prevented or managed with the help of your health care team.

### HOW CAN I COPE WITH NON-HODGKIN LYMPHOMA?

Absorbing the news of a cancer diagnosis and communicating with your doctor are key parts of the coping process. Seeking support, becoming organized, and considering a second opinion are other steps. Take care of yourself during this time. Understanding your emotions and those of people close to you can be helpful in managing the diagnosis, treatment, and healing process.

## QUESTIONS TO ASK THE DOCTOR

Regular communication is important in making informed decisions about your health care. Consider asking the following questions of your doctors:

- What type and subtype of lymphoma do I have?
- Can you explain my pathology report (laboratory test results) to me?
- What stage is the lymphoma?
- Has it spread to other parts of my body?
- Would you explain my treatment options?
- What clinical trials are open to me?
- Do I need to begin treatment right away?
- What is the goal of each treatment?
- How will this treatment benefit me?
- How will this treatment affect my daily life? Will I be able to work, exercise, and perform my usual activities?
- Will this treatment affect my ability to become pregnant or have children?
- What is the expected timeline for my treatment plan?
- What long-term side effects may be associated with my cancer treatment?
- Where can I find emotional support for me and my family?
- Whom do I call for questions or problems?
- Is there anything else I should be asking?

Additional questions to ask the doctor can be found at [www.cancer.net/nhl](http://www.cancer.net/nhl).

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*Information in ASCO's patient education materials is not intended as medical advice or as a substitute for the treating doctor's own professional judgment; nor does it imply ASCO endorsement of any product, service, or company.*

*ASCO believes that all treatment decisions should be made between patients and their doctors.*

**For more information, visit ASCO's patient website,  
[www.cancer.net](http://www.cancer.net), or call 888-651-3038.**

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## TERMS TO KNOW

### **B cell:**

A white blood cell that makes antibodies to fight disease

### **Benign:**

A tumor that is not cancerous

### **Biopsy:**

Removal of a tissue sample that is then examined under a microscope to check for cancer cells

### **Bone marrow aspiration & biopsy:**

Removal of a tissue sample from the center of the bones

### **Chemotherapy:**

The use of drugs to destroy cancer cells

### **Lymph node:**

A tiny, bean-shaped organ that fights infection

### **Malignant:**

A tumor that is cancerous

### **Metastasis:**

The spread of cancer from where the cancer began to another part of the body

### **Oncologist:**

A doctor who specializes in treating people with cancer

### **Prognosis:**

Chance of recovery

### **Radiation therapy:**

The use of high-energy x-rays to destroy cancer cells

### **T cell:**

A white blood cell that directly fights disease

### **Tumor:**

A mass of tissue that requires a biopsy