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Targeted Therapy Combination for Lymphoma Is More Effective Than Standard Chemotherapy [1]

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A long-term study shows that a combination of bendamustine (Treanda) and rituximab (Rituxan) keeps two uncommon types of non-Hodgkin lymphoma (NHL), indolent (slow-growing) lymphoma and mantle cell lymphoma, from worsening longer than standard chemotherapy. Bendamustine and rituximab are drugs called targeted therapies. Targeted therapy is a treatment that targets the cancer's specific genes, proteins, or the tissue environment that contributes to cancer growth and survival.

For a long time, the standard treatment for NHL has been rituximab plus chemotherapy with cyclophosphamide (Cytoxan), doxorubicin (Adriamycin), vincristine (Oncovin, Vincasar), and prednisone (multiple brand names). This treatment combination is commonly called R-CHOP.

In this study, patients with untreated indolent and mantle cell lymphoma received either bendamustine and rituximab or R-CHOP. Researchers found that the bendamustine and rituximab combination more than doubled the time it took for the lymphoma to worsen when compared with R-CHOP. For patients receiving bendamustine and rituximab, the lymphoma worsened nearly six years after treatment began compared with nearly three years for the patients receiving R-CHOP. In fact, bendamustine and rituximab worked so well that nearly half of the patients who had their disease worsen while taking R-CHOP were given this combination. In addition, bendamustine and rituximab caused fewer side effects, such as hair loss, nerve problems, and infections. However, patients receiving bendamustine and rituximab were more likely to have mild skin reactions, which are a common side effect of targeted therapies.

What this means for patients

"This study clearly shows that the bendamustine-based regimen is more effective and has fewer side effects than the standard chemotherapy regimen," said lead author Mathias J. Rummel, MD, PhD, Professor of Medicine at the University Hospital Giessen in Germany. "Just as important, bendamustine-based therapy allowed patients to have a better quality of life while undergoing therapy." Bendamustine has been used in Europe for decades, but only became available in the

United States in 2008. The combination of bendamustine and rituximab is being used at some cancer centers in the United States. If you have indolent or mantle cell lymphoma, it's important to talk with your doctor about this drug combination in addition to all your treatment options.

Questions to Ask Your Doctor

- What type of lymphoma do I have?
- What are my treatment options?
- Are bendamustine and rituximab treatment options for me?
- What treatment plan do you recommend? Why?
- What are the side effects of treatment? How will they be managed?

For More Information

Guide to Non-Hodgkin Lymphoma [2]

Understanding Targeted Treatments [3]

Skin Reactions to Targeted Therapies [4]

Managing Side Effects [5]

Links:
[1] http://www.cancer.net/targeted-therapy-combination-lymphoma-more-effective-standard-chemotherapy
[2] http://www.cancer.net/patient/Cancer+Types/Lymphoma+-+Non-Hodgkin
[3] http://www.cancer.net/patient/All+About+Cancer/Cancer.Net+Feature+Articles/Treatments%2C+Tests%2C+and+Procedures/Un
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