

## Allogeneic transplant may be a good treatment option for patients 40 years or older with non-Hodgkin lymphoma

### What were researchers trying to learn?

Researchers wanted to learn how well transplants work in patients who are 40 years or older and have non-Hodgkin lymphoma (NHL). NHL is a group of cancers of the white blood cells called lymphocytes. There are more than 30 different types of NHL.

In this study, researchers looked at the outcomes (results) of more than 1,200 patients with many different types of NHL who had an allogeneic transplant between 2001 and 2007. An allogeneic transplant uses healthy blood-forming cells from a donor to replace the patient's unhealthy ones.

The researchers studied the outcomes for patients who had transplant from a related donor or an unrelated donor. None of the patients in the study had a transplant using umbilical cord blood. The researchers only looked at patients who had reduced-intensity transplants. Reduced-intensity transplants use less intense treatments to prepare patients for their transplants.

### What did researchers find?

Researchers compared transplant outcomes in 3 different patient age groups: 40 to 54 years old, 55 to 64 years old, and 65 years old and older. They found that although patients in the lower age group did the best, those patients in the upper 2 age groups did about the same. At 3 years after their transplants, the percent of patients alive in each age group were:

- 54% of patients who were 40-54 years old
- 40% of patients who were 55-64 years old
- 39% of patients who were 65 years or older

The researchers were very encouraged by these results. They noted that nearly 40% (4 out of 10) of patients who were 55 years old and older were alive 3 years after their transplant. They concluded that reduced-intensity transplants can be a good treatment option for many patients with NHL.

The researchers also looked at how many patients got graft-versus-host disease (GVHD), which is a serious and possibly life-threatening complication after allogeneic transplant. The researchers found the chances of getting GVHD did not depend on how old the patients were. They were also encouraged by this result.

#### Important Points:

- **Reduced-intensity transplant may help patients who are 40 years or older and have NHL.**
- **The chance of getting GVHD did not depend on the patient's age.**

### Why is this important?

Transplant doctors can now give up-to-date information on 3-year survival to their patients with NHL who are considering a reduced-intensity transplant. This can help patients decide whether to get a transplant or choose a different treatment. Transplant doctors can also tell their patients with NHL how likely they are to get GVHD after their transplant.

### Questions to ask your doctor

If you have NHL and are considering a transplant, you may want to ask:

- How long do most patients my age live with NHL?
- Do you recommend that I get a reduced-intensity transplant? Why or why not?
- Is there anything about my health that would raise or lower my chances of doing well after transplant?
- When is the best time for me to have a transplant?
- What are my chances of living disease-free if I get a transplant? If I don't get a transplant?
- What can you tell me about my quality of life if I get a transplant? If I don't?

### Learn more about

- [This research study](#)
- [Blood and marrow transplant for NHL](#)

### Source

McClune BL, Ahn KW, Wang H-L, Antin JH, et al. Allogeneic transplantation for patients age  $\geq 40$  years with non-Hodgkin lymphoma: Encouraging progression-free survival. *Biology of Blood and Marrow Transplantation*. 2014 Jul 1; 20(7):960-968. Epub 2014 March 15. PMC4057955.

### About this research summary

Ground-breaking research into blood and marrow transplant is happening every day. That research is having a significant impact on the survival and quality of life of thousands of transplant patients. But the research is written by scientists for scientists. By providing research news in an easy-to-understand way, patients, caregivers, and families have access to useful information that can help them make treatment decisions.

This information is provided on behalf of the Consumer Advocacy Committee of the CIBMTR® (Center for International Blood and Marrow Transplant Research®). The CIBMTR is a research collaboration between the National Marrow Donor Program®/Be The Match® and the Medical College of Wisconsin.