

IELSG Newsletter 37 - April 2011

Dear Friends,

The **14th IELSG annual meeting** was held in Paris on March 11 and 12, 2011. We would like to thank Catherine Thieblemont for the excellent organization and all the sponsors for their support. Of course we would like as well to thank all the colleagues who participated and contributed to the very interesting discussions during the meeting. Here we briefly summarize **the principal issues** that have been discussed.

Ongoing clinical studies

There are currently three prospective therapeutic trials enrolling patients.

IELSG 34 – A Multicenter Phase II study to evaluate the clinical activity and the safety profile of everolimus (RAD001) in marginal zone B-cell lymphomas (MZL)

The study is currently open at ed centers in Italy, Switzerland and Austria. So far, only 6 patients have been enrolled, accrual has been slow due to regulatory issues in some centers in Austria and in Italy. We hope these problems will be resolved soon and accrual will significantly increase aiming to complete the trial in one year.

IELSG 30 - A phase II study of R-CHOP with intensive CNS prophylaxis and scrotal irradiation in patients with primary testicular diffuse large B-cell lymphoma

This study has also encountered difficulties in the regulatory process and is still not open in several centers in Italy. An additional difficulty is given by the fact that testis lymphoma is a very rare entity and even large institutions may not be sure to provide a consistent patient contribution. Nevertheless in the previous phase II testis trial, 50 patients were enrolled and the final report of this study has been recently accepted for publication in JCO. We hope that its publication will rise the attention on our ongoing study making it successful as the previous one.

IELSG 32 - Randomized phase II trial on primary chemotherapy with high-dose methotrexate and high-dose cytarabine with or without thiotepa, and with or without rituximab, followed by brain irradiation vs. high-dose chemotherapy supported by autologous stem cells transplantation for immunocompetent patients with newly diagnosed primary CNS lymphoma

Despite its complex design, the trial accrual has been very good: thirty patients have been enrolled and the first 15 have completed treatment. A safety interim analysis, as planned per protocol, will be now performed and information will be provided in the next newsletter. In the meanwhile the study will continue to enroll patients.

New trial in the pipeline**A randomized study of radiotherapy in primary mediastinal lymphoma**

The main part of our discussions was focused on the next study in primary mediastinal lymphomas. It has been definitely decided that IELSG will perform a non-inferiority trial comparing irradiation therapy versus observation in patients with primary mediastinal lymphomas who have achieved complete remission following aggressive chemoimmunotherapy (anthracycline and rituximab containing).

Modality of central PET evaluation was discussed and it has been decided that will be performed based on a web repository, which is currently in preparation. A group of nuclear medicine specialists has also been constituted to organize the central evaluation system and establish the modalities of quality control.

Additionally, consensus has been reached regarding the definition of PET response: only patients who have a completely negative PET or who have a minimal residual uptake below the mediastinal one will be randomized (details will be included in the protocol).

An investigator meeting for this study is planned during the 11th ICML meeting.

With respect to the **11th ICML meeting**, we have attached here the [final program](#) and we hope to see you all in Lugano.

Our **next IELSG meeting** will be held in **Lugano on April 20-21**, 2012. It will be conducted in conjunction with the ECLU (a major European oncology educational event) which will focus on hemato-oncology and will also be held in Lugano on April 21 and 22.

Kind regards

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