Bispecific Antibodies in Aggressive B-Cell Lymphoma Case Presentation

Savan Shah, MD

Hematology/Oncology Fellow

Moffitt Cancer Center/USF Health





HPI

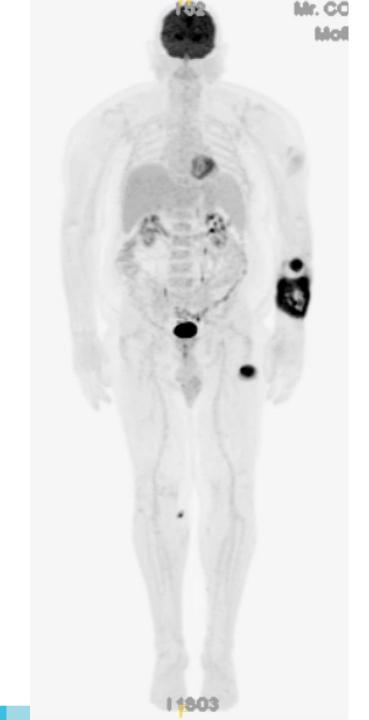
- 83 year old Caucasian man with previous history of lymphoma treated with CHOP presented to his dermatologist with a 3 month history of an enlarging skin lesion on his left forearm
- Skin biopsy of left forearm consistent with Diffuse large B-cell lymphoma, germinal center type; the cells were positive for CD20, CD10, BCL6, BCL2 and were negative for CD30, MUM1. Ki-67 of 60-70%.
- FISH showed BCL6 and BCL2 rearrangements
- PET/CT showed no FDG avid adenopathy in chest, abdomen or pelvis. FDG avid focus in left proximal thigh with SUV of 11.4.



Treatment Course

- Patient initiated on mini-R-CHOP due to history of CAD/CABG;
- He had significant growth of existing cutaneous lesions as well as several new cutaneous lesions after 2 cycles of treatment
- Restaging imaging showed multifocal cutaneous and and subcutaneous lesions



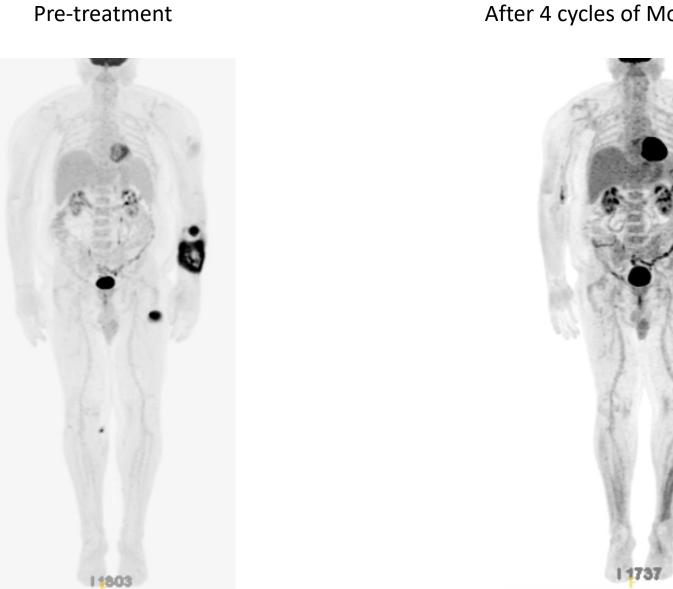






Treatment Course (cont.)

- Within 15 days of treatment, there was clinical reduction in size of cutaneous lesions
- Treatment was complicated by G4 neutropenia requiring GCSF support
- PET/CT after 4 cycles of treatment showed CR







Treatment Course (cont.)

- Completed 8 cycles of therapy with continued CR at 15 months on PET/CT
- Presented at 16 months with hyperinflammatory state with TLS and circulating tumor cells and bone marrow involvement of DLBCL