Lymphoma Facts



Lymphoma is the most common type of blood cancer and affects a type of white blood cell called lymphocytes.²



The causes of lymphoma are largely unknown. Hodgkin lymphoma and non-Hodgkin lymphoma can occur in children, teens and adults.³



There are two main types— Hodgkin lymphoma and non-Hodgkin lymphoma.³

Hodgkin Lymphoma

The most common symptom of Hodgkin lymphoma is swollen lymph nodes in the neck, chest or underarm area. Hodgkin lymphoma often travels from one group of lymph nodes to the next in a predictable path.⁴

The diagnosis process includes a series of tests to decipher the disease stage which can range from Stage I to Stage IV.





TREATMENT OPTIONS

Treatment generally consists of combination chemotherapy. After initial treatment the majority of Hodgkin lymphoma patients will be considered cured, as many will achieve not only complete remission, but a long-term remission.⁵

While Hodgkin lymphoma has benefitted from a number of treatment advancements in recent years, there is no single approach to treating Hodgkin lymphoma, and combination therapies often yield the best results.^{5,6}

References

- 1 Leukemia & Lymphoma Society. Facts and Statistics.
- https://www.lls.org/facts-and-statistics/facts-and-statistics-overview/facts-and-statistics. Accessed January 2021.
- 2 Lymphoma Research Foundation. About Lymphoma. https://lymphoma.org/aboutlymphoma/. Accessed January 2021. 3 Center for Disease Control and Prevention. Lymphoma. https://www.cdc.gov/cancer/lymphoma/index.htm. Accessed January 2021.
- 4 Moffitt Cancer Center. Hodgkin & Non-Hodgkin Lymphomas. https://moffitt.org/cancers/lymphomas-hodgkin-and-non-hodgkin/. Accessed January 2021.
- 5 American Cancer Society. Survival Rates for Hodgkin Lymphoma.
- https://www.cancer.org/cancer/hodgkin-lymphoma/detection-diagnosis-staging/survival-rates.html, Accessed January 2021. 6 National Health Service (NHS) Hodgkin lymphoma treatment. https://www.nhs.uk/conditions/hodgkin-lymphoma/treatment/ Accessed January 202



Non-Hodgkin Lymphoma

More than 60 non-Hodgkin lymphoma subtypes have been identified and assigned names by the World Health Organization (WHO), characterized by appearance and cell composition.

These subtypes of non-Hodgkin lymphomas are divided into two major groups:



T-cell Lymphomas

Develops from abnormal T-lymphocytes



B-cell Lymphomas Develops from abnormal B-lymphocytes

There are many different forms of T-cell lymphomas, some of which are extremely rare. T-cell lymphomas can be aggressive (fast-growing) or indolent (slow-growing).

Common symptoms of non-Hodgkin lymphoma include:

- swollen lymph nodes
- unexplained weight loss

- fever
- night sweats
- persistent fatigue
- loss of appetite
- cough or chest pain
- abdominal pain
- sensation of bloating or fullness (due to an enlarged spleen)
- itchy skin
- enlargement of the spleen or liver
- rashes or skin lumps⁷

PTCL makes up 10-24% of non-Hodgkin

lymphoma cases in various regions.7,11

TREATMENT OPTIONS

There is no one-size-fits-all approach to treating non-Hodgkin lymphoma. Subtypes can vary so much that they present as a practically different disease altogether, so treatment options also vary greatly.⁷

Peripheral T-cell Lymphomas (PTCL)

PTCLs comprise a group of more than 25 subtypes of non-Hodgkin lymphoma.⁸⁻¹⁰

The most commonly used treatment options are combination chemotherapy regimens or other multidrug regimens. After the use of combination therapies, some patients may benefit from autologous stem cell transplant (ASCT), however, many patients are unable to receive transplants because they are not fit enough.¹²

Systemic Anaplastic Large Cell Lymphoma (sALCL)

Patients with sALCL are divided into two groups: ALK-positive and ALK-negative ALCL. ALK-positive ALCL responds well to standard chemotherapy treatments, putting most patients into long-term remission. Most people with ALK-negative ALCL initially respond to treatment as well, the disease is more likely to relapse within five years.¹³

Initial treatment for sALCL is a combination chemotherapy regimen.¹³ However, relapse may occur and outcomes are poor among patients. In many cases, prescribers turn to combination therapies as a treatment option.¹⁴

Cutaneous T-cell Lymphoma (CTCL)

CTCL most commonly affects the skin, but can impact each patient differently.¹⁵ Most CTCL types are generally treatable, but not curable. Patients with CTCL can receive either skin-directed or systemic therapies, depending upon the stage of their disease.¹⁵



7 Leukemia & Lymphoma Society. Non-Hodgkin Lymphoma. https://www.lls.org/lymphoma/non-hodgkin-lymphoma. Accessed January 2021. 8 Swerdlow SH, et al. Blood 2016;127:2375-2390.

- 9 Vose J, et al. J Clin Oncol 2008;26(25):4124-4130.
- 10 Matutes E. Int J Lab Hem. 2018;40(1):97-103. 11 Tang T, et al. Advances in Hematology. 2010, article ID 624040, 8 pages
- 12 Lymphoma Research Foundation. Understanding Peripheral T-Cell Lymphoma.

https://lymphoma.org/wp-content/uploads/2020/11/LRF-PTCL-Lymphoma_Factsheet_110920.pdf. Accessed January 2020.

13 Lymphoma Research Foundation. Anaplastic Large Cell Lymphoma. Accessed https://lymphoma.org/aboutlymphoma/nhl/alcl/. January 2021. 14 Savage KJ, et al. Blood 2008; 11 (12): 5496-5504.

15 Willemze R, Jaffe ES, Burg G et al. WHO-EORTC classification for cutaneous lymphomas. Blood 2005; 105: 3768-3785.

