

# Autologous stem-cell transplantation as consolidation of first-line chemotherapy in patients with peripheral T-cell lymphoma: a multicenter GELTAMO/FIL study

Alejandro Martín García-Sancho,<sup>1</sup> Monica Bellei,<sup>2</sup> Miriam López-Parra,<sup>1</sup> Giuseppe Gritti,<sup>3</sup> María Cortés,<sup>4</sup> Silvana Novelli,<sup>5</sup> Carlos Panizo,<sup>6</sup> Luigi Petrucci,<sup>7</sup> Antonio Gutiérrez,<sup>8</sup> Ivan Dlouhy,<sup>9</sup> Mariana Bastos-Oreiro,<sup>10</sup> Juan M. Sancho,<sup>11</sup> María J. Ramírez,<sup>12</sup> José M. Moraleda,<sup>13</sup> Estrella Carrillo,<sup>14</sup> Ana I. Jiménez-Ubieto,<sup>15</sup> Isidro Jarque,<sup>16</sup> Lorella Orsucci,<sup>17</sup> Estefanía García-Torres,<sup>18</sup> Carlos Montalbán,<sup>19</sup> Anna Dodero,<sup>20</sup> Reyes Arranz,<sup>21</sup> Natalia de las Heras,<sup>22</sup> María J. Pascual,<sup>23</sup> Javier López-Jiménez,<sup>24</sup> Michelle Spina,<sup>25</sup> Alessandro Re,<sup>26</sup> Sonia González de Villambrosia,<sup>27</sup> Sabela Bobillo,<sup>28</sup> Massimo Federico<sup>29</sup> and Dolores Caballero<sup>1</sup> on behalf of the Grupo Español de Linfomas y Trasplante Autólogo de Médula Ósea (GELTAMO) and Fondazione Italiana Linfomi (FIL)

**Correspondence:** A. M. García-Sancho  
amartingar@usal.es

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<sup>1</sup>Department of Hematology, Hospital Universitario de Salamanca, IBSAL, CIBERONC, Salamanca, Spain; <sup>2</sup>Fondazione Italiana Linfomi (FIL) Onlus, Modena, Italy; <sup>3</sup>Hematology and Bone Marrow Transplant Unit, ASST Papa Giovanni XXIII, Bergamo, Italy; <sup>4</sup>Department of Statistics, Hospital Universitario de Salamanca / IBSAL, Salamanca, Spain; <sup>5</sup>Hematology Department, Hospital de la Santa Creu i Sant Pau, José Carreras Leukemia Research Institute and IIB Sant Pau, Barcelona, Spain; <sup>6</sup>Department of Hematology, Clínica Universidad de Navarra, IdiSNA, Pamplona, Spain; <sup>7</sup>Department of Translational and Precision Medicine, Sapienza University, Rome, Italy; <sup>8</sup>Department of Hematology, Son Espases University Hospital, IdISBa, Palma de Mallorca, Spain; <sup>9</sup>Department of Hematology, Hospital Clínic de Barcelona, Barcelona, Spain; <sup>10</sup>Hematology Department, Hospital Gregorio Marañón / IISGM, Madrid, Spain; <sup>11</sup>Hematology Department, ICO-IJC-Hospital Germans Trias i Pujol, Badalona, Spain; <sup>12</sup>Hematology Department, Hospital de Especialidades de Jerez de la Frontera, Cádiz, Spain; <sup>13</sup>Hematology Department, Hospital Clínico Universitario Virgen de la Arrixaca, Murcia, Spain; <sup>14</sup>Hematology Department, Hospital Universitario Virgen del Rocío, Seville, Spain; <sup>15</sup>Hematology Department, Hospital Universitario 12 de Octubre, Madrid, Spain; <sup>16</sup>Hematology Department, CIBERONC, Instituto Carlos III, Hospital Universitario y Politécnico La Fe, Valencia, Spain; <sup>17</sup>Hematology, Azienda Ospedaliero-Universitaria Città della Salute e della Scienza, Multidisciplinary Outpatient Oncology Clinic, Candiolo Cancer Institute, FPO-IRCCS, Candiolo (Torino), Italy; <sup>18</sup>Hematology Department, Hospital Universitario Reina Sofía, Cordoba, Spain; <sup>19</sup>Department of Translational Research, MD Anderson Cancer Center, Madrid, Spain; <sup>20</sup>Division of Hematology and Bone Marrow Transplantation, Fondazione IRCCS Istituto Nazionale dei Tumori, Milano, Italy; <sup>21</sup>Hematology Department, Hospital La Princesa, Madrid, Spain; <sup>22</sup>Department of Hematology, Complejo Hospitalario de León, León, Spain; <sup>23</sup>Hematology Department, Regional Hospital, Málaga, Spain; <sup>24</sup>Hematology Department, Hospital Universitario Ramón y Cajal, Madrid, Spain; <sup>25</sup>Division of Medical Oncology and Immune-related Tumors, Centro di Riferimento Oncologico di Aviano (CRO) IRCCS, Aviano, Italy; <sup>26</sup>Division of Hematology, ASST Spedali Civili di Brescia, Brescia, Italy; <sup>27</sup>Hematology Department, Hospital Universitario Marqués de Valdecilla, Santander, Spain; <sup>28</sup>Department of Hematology, University Hospital Vall d'Hebron and Universitat Autònoma de Barcelona, Barcelona, Spain and <sup>29</sup>Medical Oncology, CHIMOMO Department, University of Modena and Reggio Emilia, Modena, Italy.

**Supplemental Table 1.** Univariate analysis of overall survival by subgroups

Characteristic	ASCT group		Non-ASCT group		<b>p</b>
	N	5-year OS (%)	N	5-year OS (%)	
Sex					
Male	62	76	42	59	0.099
Female	41	67	29	71	0.705
Histological diagnosis					
PTCL, NOS	41	73	26	56	0.431
AITL	31	70	17	57	0.324
ALCL, ALK-negative	19	88	19	74	0.186
Others	12	62	9	66	0.809
Age					
≤60 years	91	73	52	61	0.187
>60 years	12	81	19	67	0.309
ECOG-PS					
0-1	82	74	62	64	0.249
2-4	20	74	7	57	0.251
LDH					
Normal	44	69	42	66	0.434
Increased	54	70	22	58	0.123
Ann-Arbor stage					
I-II	16	94	35	74	0.315
III-IV	86	70	36	50	<b>0.028</b>
Extranodal sites					
0-1	83	75	59	67	0.272
≥2	20	69	12	40	0.099
BM infiltration					
Yes	33	63	15	60	0.307
No	69	79	55	64	0.254
B symptoms					
Yes	51	71	28	51	0.057
No	52	76	39	69	0.649
IPI					
0-1	40	59	39	72	0.586
2-3	48	71	22	67	0.234
4-5	10	67	6	33	0.315
PIT					
0-1	66	78	53	63	0.207
2	25	61	7	86	0.695
3-4	11	79	7	43	0.114
First-line treatment					
CHOP-like	68	76	58	62	0.072
Others	35	69	13	63	0.841
Radiotherapy					
Yes	3	33	19	68	0.184
No	100	75	52	60	0.082

Abbreviations: AITL, angioimmunoblastic T-cell lymphoma; ALCL, anaplastic large cell lymphoma; ASCT, autologous stem-cell transplantation; BM, bone marrow; CHOP, cyclophosphamide, doxorubicin, vincristine, and prednisolone; ECOG-PS, Eastern Cooperative Oncology Group Performance Status; IPI, International Prognostic Index; PIT, Prognostic Index for T-cell lymphoma; PTCL, NOS, peripheral T-cell lymphoma, not otherwise specified; OS, overall survival.

**Supplemental Table 2.** Separate analysis of patients in partial response after first line

Characteristic	Missing N	ASCT N (%)	Non-ASCT N (%)	p
Total number of evaluable patients		15	23	
Male sex	0	14 (93.3)	18 (78.3)	0.213
Age, years, median (range)	0	55 (31-63)	45 (27-63)	0.300
Older than 60		4 (26.7)	5 (21.7)	0.727
Histological diagnosis	0			
Peripheral T-cell lymphoma, NOS		5 (33.3)	11 (47.8)	
Angioimmunoblastic T-cell lymphoma		2 (13.3)	8 (34.8)	
Anaplastic large cell lymphoma, ALK-negative		5 (33.3)	3 (13.0)	0.220
Enteropathy-associated T-cell lymphoma		1 (6.7)	4 (4.3)	
Hepatosplenic T-cell lymphoma		2 (13.3)	0	
ECOG performance status 2-4	0	5 (33.3)	9 (39.1)	0.717
Ann-Arbor stage III-IV	2	14 (93.3)	20 (95.2)	0.806
LDH increased	2	9 (60.0)	14 (66.7)	0.681
Bone marrow infiltration	2	4 (26.7)	11 (47.8)	0.192
IPI	4			
0-1		2 (13.3)	1 (5.3)	
2-3		8 (53.4)	12 (63.2)	
4-5		5 (33.3)	6 (31.6)	
PIT	2			
0-1		9 (60.0)	8 (38.1)	
2		2 (13.3)	2 (13.3)	
3-4		4 (26.7)	4 (19.0)	
First-line treatment	0			
CHOP or CHOP-like		6 (40.0)	19 (82.6)	
CHOEP or CHOEP-like		2 (13.3)	0	
MACOP-B or VACOP-B		1 (6.7)	2 (8.7)	
CHOP-like alternating with others		5 <sup>1</sup> (33.3)	1 <sup>2</sup> (4.3)	
Others		1 <sup>3</sup> (6.7)	1 <sup>4</sup> (4.3)	
Radiotherapy as part of first-line	0	0	0	-

<sup>1</sup>ESHAP (n=4), Hyper-CHiDAM (n=1)

<sup>2</sup>ESHAP (n=1)

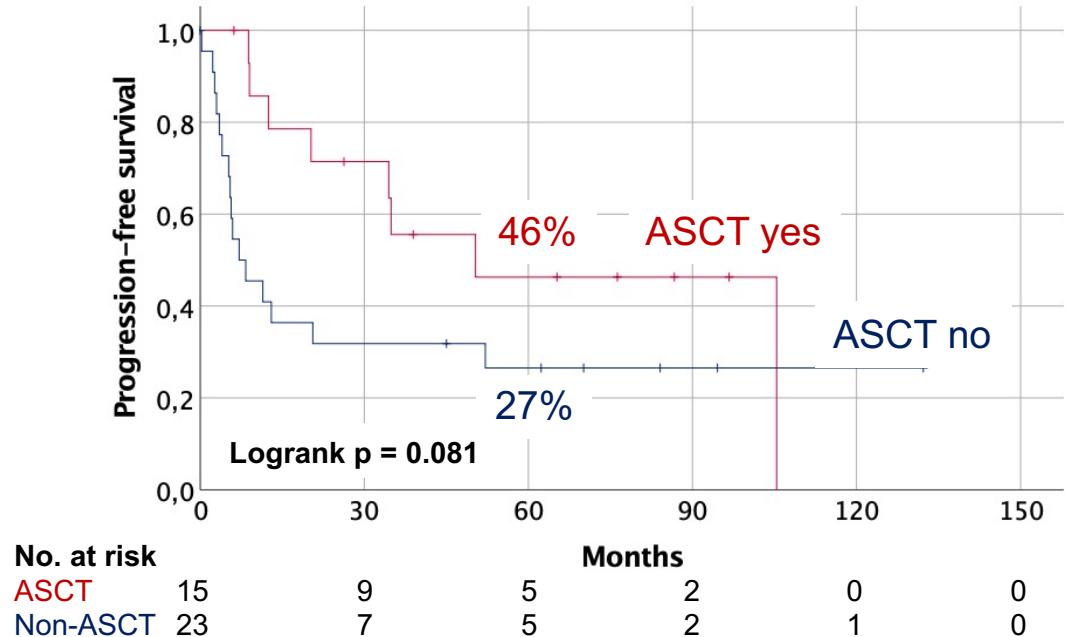
<sup>3</sup>ESHAP (n=1),

<sup>4</sup>IVE-MTX-dexamethasone (n=1),

Abbreviations: ASCT, autologous stem-cell transplantation performed after the first-line; CHOP, cyclophosphamide, doxorubicin, vincristine, and prednisolone; ECOG, Eastern Cooperative Oncology Group; ESHAP, etoposide, solumedrol, cytarabine, and cisplatin; HD-MTX, high-dose methotrexate; Hyper-CHiDAM, hyperfractionated cyclophosphamide, high-dose arabinosylcytosine, and high-dose methotrexate; IPI, International Prognostic Index; IVE-MTX, ifosfamide, epirubicin, etoposide, and methotrexate; MACOP-B, methotrexate, doxorubicin, cyclophosphamide, vincristine, prednisone, and bleomycin; PIT, Prognostic Index for T-cell lymphoma; VACOP-B, etoposide, doxorubicin, cyclophosphamide, vincristine, prednisone, and bleomycin.

**Supplemental Figure 1.** Separate analysis of patients in partial response after the 1<sup>st</sup> line: Kaplan–Meier estimation of progression-free survival (A) and overall survival (B) in the autologous stem-cell transplantation (ASCT) and non-ASCT cohorts

A)



B)

