

# High-risk stage IIB Hodgkin lymphoma treated in the H10 and AHL2011 trials: total metabolic tumor volume is a useful risk factor to stratify patients at baseline

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**Received:** September 13, 2021.

**Accepted:** May 27, 2022.

**Prepublished:** May 31, 2022.

<https://doi.org/10.3324/haematol.2021.280004>

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## Supplemental data

### Supplemental table 1: Treatment actually received

Abbreviations: ABVD, doxorubicin, bleomycin, vinblastine, and dacarbazine; escBEACOPP (escalated BEACOPP), bleomycin, etoposide, doxorubicin, cyclophosphamide, vincristine, procarbazine and prednisone; INRT, involved-node radiotherapy;

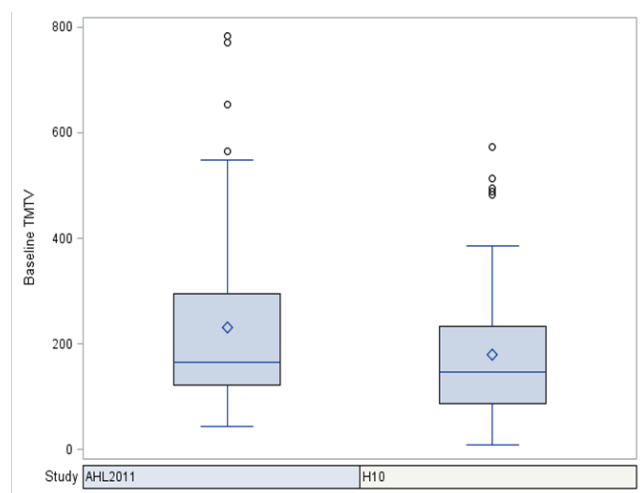
	H10 study N=65	AHL2011 study N=83	All N=148
escBEACOPP	0	51 (61%)	51 (34%)
escBEACOPP + ABVD	0	32 (39%)	32 (22%)
ABVD	18 (28%)	0	18 (12%)
ABVD + INRT	38 (58%)	0	38 (26%)
ABVD + escBEACOPP + INRT	9 (14%)	0	9 (6%)

### Supplemental table 2: Extranodal involvement

Abbreviations: EN=extranodal; M/T=mediastinum/thorax

	H10 study N=65	AHL2011 study N=83	All N=148
M/T $\geq$ 0.33 without EN involvement	58 (89.2%)	74 (89.2%)	132 (89.2%)
M/T $\geq$ 0.33 and EN involvement	5 (7.7%)	8 (9.6%)	13 (8.8%)
M/T <0.33 and EN involvement	2 (3.1%)	1 (1.2%)	3 (2%)

Supplemental figure 1: Distribution of baseline total metabolic tumor volume (TMTV) by study. Horizontal blue line represents the median.



Supplemental figure 2: Progression-free survival (PFS) according to international prognosis score (A) and including the three individual risk factors (baseline TMTV, PET result and IPS). The three respective curves illustrate PFS when patients had none (blue curve), or one of three factors (red curve) and at least 2 of three (green curve).

