

ALLOGENEIC AND AUTOLOGOUS STEM CELL TRANSPLANTATION FOR HEPATOSPLENIC T CELL LYMPHOMA: A RETROSPECTIVE STUDY OF THE EBMT LYMPHOMA WORKING PARTY.

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Hepatosplenic T-cell lymphoma (HSTL) is an extremely aggressive and rare subtype of peripheral T cell lymphoma (PTCL). Although anecdotal cases of successful hematopoietic stem cell transplantation HSCT for HSTL have been described, structured analyses of the efficacy of autologous or allogeneic HSCT in HSTL have not been published until this study.

The objective of this study was to analyze the outcome of patients who underwent allogeneic (alloHSCT) or autologous HSCT (autoHSCT) for HSTL.

This is a registry-based retrospective multicenter study including patients 18 years or above with histologically verified $\gamma\delta$ HSTL who underwent alloHSCT or autoHSCT between January 2004 and January 2013 and were reported to the European Society for Bone and Marrow Transplantation (EBMT). Baseline patient, disease and transplant data were collected from MED-A forms. 76 patients were identified in the EBMT database. Additional information upon center request was provided for 36 them. Eleven of these had to be excluded after histopathology review, leaving 25 patients in the final study sample (alloHSCT 18, autoHSCT 7). With a median follow-up of 36 months, 2 patients relapsed after alloHSCT, resulting in a 3-year progression-free survival of 48%.

This study shows that allotransplantation can provide long-term disease control in patients with hepatosplenic T cell lymphoma. Preliminary evidence suggests that graft-versus lymphoma activities are contributing to disease eradication in this otherwise inevitably fatal lymphoma subset.