BEACOPP IS A POWERFUL REGIMEN FOR POOR RISK HD PATIENTS.

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In 1998 the German Hodgkin Study Group reported the trial results of a newly constructed chemotherapy regimen for Hodgkin's disease, carrying the acronym BEACOPP. Many years of investigation have led to modifications in the protocol, finally establishing the originally escalated regimen as the single efficient and applicable schedule. It was originally designed for patients with advanced stage disease, but it widened the indications to all unfavorable categories, and eventually to all stages and types of the disease.

At our institution, we accepted the regimen gradually and with careful monitoring. Since in that period there were no quality alternatives available, our initial experiences were drawn from the administration of this regimen to patients who failed the standard chemotherapy regimens used.
Following the encouraging results, obtained in quite a few refractory/relapsed patients, we continued using BEACOPP in such cases, but also introduced the regimen as initial choice in patients with HD who carried 3 or more adverse prognostic factors, according to the Hasenclever IPI score.

The experience is a single-center one, therefore not carrying a statistical significance or impact. Nevertheless, the treatment results are instructive and provide an encouraging option for patients who are otherwise labeled as progressively and irreversibly deteriorating.

We present our overall results with this regimen, regardless of disease stage or risk factors, regardless of previous treatment(s), as well as with different schemes and dosing alterations of the protocol, for the period of roughly 15 years in which we have implemented it.
As for the adverse effects of this regimen, widely discussed and reported, our observations are still not unsettling, since we have not observed any cases with a developing acute leukemia following the protocol administration. The period of observation may be too short for drawing conclusions on the secondary malignancies rate, but we have not observed any excessive occurrence rate. Regarding this issue, it is necessary to consider the relatively short period of utilization, small number of patients, the variability in dosing and length of treatment, as well as the heterogeneity of the patient population.