

Survival rates increase with chemotherapy alone in patients with limited-stage Hodgkin's lymphoma

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New research led by the NCIC Clinical Trials Group (CTG) at Queen's University has proven patients with limited stage Hodgkin's lymphoma have a better chance of long-term survival if they undergo a standard chemotherapy regimen as opposed to radiation-based treatment.

"These results will influence current treatment practices and lead to more patients being treated with chemotherapy alone," says Dr. Ralph Meyer, professor of oncology at Queen's and director of the NCIC CTG. "This trial exemplifies the importance of academic groups conducting trials that assess long-term patient outcomes."

Previously, a patient diagnosed with Stage 1A or Stage 2A Hodgkin's lymphoma was treated with chemotherapy and extensive radiation. This combination often results in long term-complications from [radiation exposure](#) including [heart conditions](#) or subsequent cancers. This study proves chemotherapy alone increases survival rates in the early stages of the disease. The trial began in 1994 and has recently undergone its final analysis.

Today's practices incorporate reduced amounts of radiation as compared with those tested in the trial, but the results demonstrate chemotherapy alone will be a preferred option for many patients.

The study was made possible through NCIC CTG's grant funding from

the Canadian Cancer Society Research Institute. The NCIC CTG led this trial in collaboration with the US-based Eastern Cooperative Oncology Group (ECOG). Both NCIC CTG and ECOG received grant funding support from the US [National Cancer Institute](#).

The results were published on-line by the [New England Journal of Medicine](#). Dr. Meyer presented the results December 12 at the American Society of Hematology conference in San Diego.

Provided by Queen's University

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