



¿Es el TPH Autólogo adecuado para DLBCL R/R?

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- COI?



Conceptos

- En ausencia de CAR-T en LATAM, el auto-TPH sigue siendo una estrategia potencialmente curativa
- Particularmente en pacientes quimiosensibles (RC/PR)
- ¿Como consolidación?

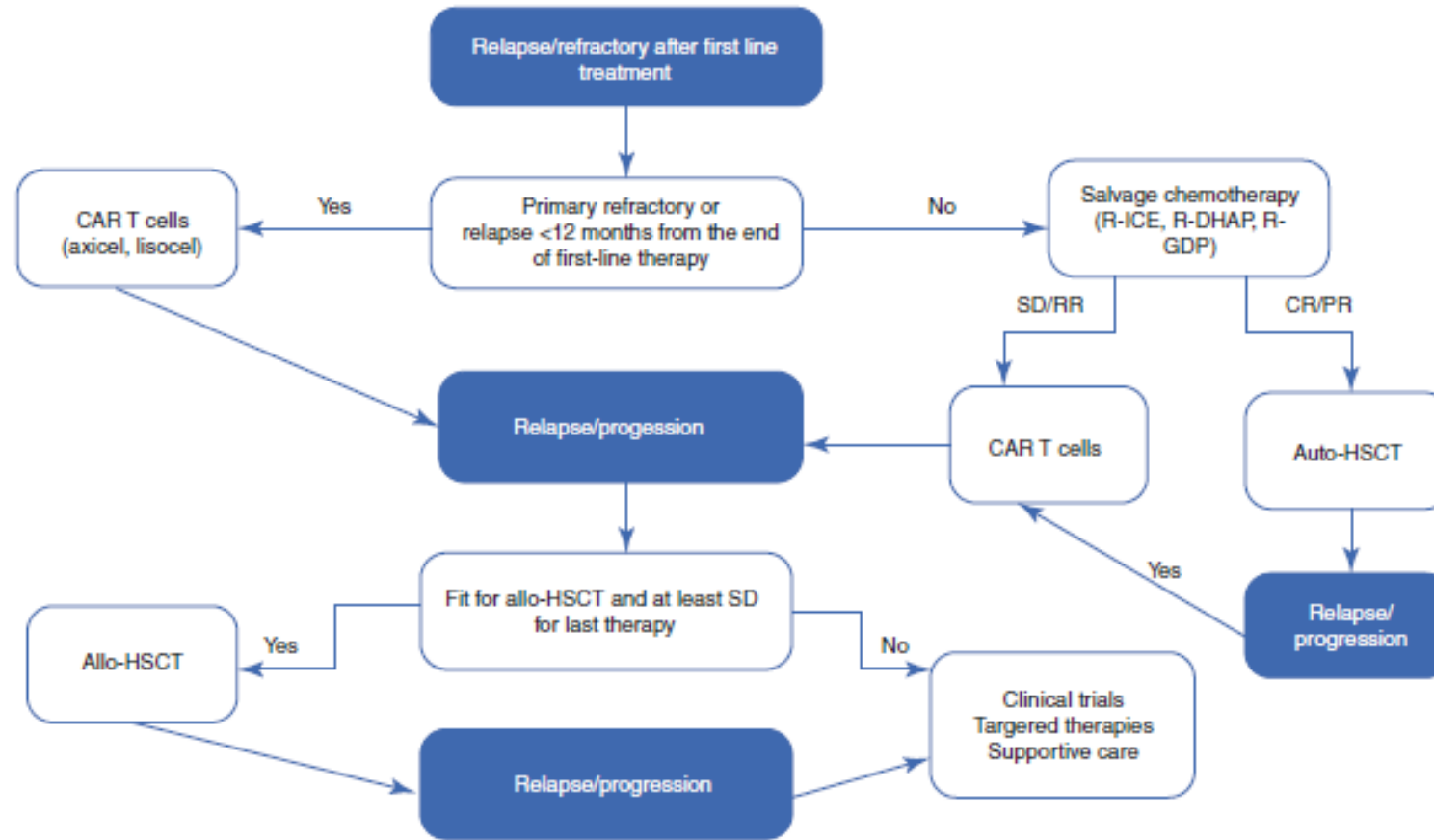


Fig. 86.1 HCT and CAR T cells in R/R LBCL: treatment decision

EBMT Handbook



Table 2. Treatment Outcomes According to Intention-to-Treat, Primary, and Sensitivity Per-Protocol Analyses

Outcome	GDP		DHAP		P	Difference (DHAP – GDP)	
	No.	%	No.	%		%	95% CI
Rate of response (CR, CRu, PR)*							
Intention-to-treat population†	140 of 310		136 of 309		.005‡	–1.2	–9.0 to 6.7
Overall RR		45.1		44.1			
CR/CRu		13.5		14.3			
PR		31.6		29.8			
Primary per-protocol analysis§	140 of 303		135 of 302		.004‡	–1.5	–9.4 to 6.4
Overall RR		46.1		44.7			
CR/CRu		13.8		14.6			
PR		32.3		30.1			
Sensitivity per-protocol analysis	140 of 287	48.8	135 of 284	47.5	.004‡	–1.3	–9.4 to 7.0
Rate of transplantation							
Intention-to-treat analysis†	158 of 310	51.0	151 of 309	48.9	.55¶	–2.1	–10.0 to 5.8
Per-protocol analysis§	158 of 303	52.1	149 of 302	49.3	.44¶	–2.5	–10.5 to 5.5

Abbreviations: CR, complete response; CRu, complete response unconfirmed; DHAP, dexamethasone, cytarabine, cisplatin; GDP, gemcitabine, dexamethasone, cisplatin; PR, partial response; RR, response rate.

*Includes four patients assessed after one cycle who had durable responses (two PRs, one CRu, one CR).

†Based on 619 patients who were randomly assigned.

‡For noninferiority.

§Based on 605 eligible patients who received at least one dose of assigned therapy.

||Based on 571 eligible patients who received at least one dose of assigned therapy and were evaluable for response.

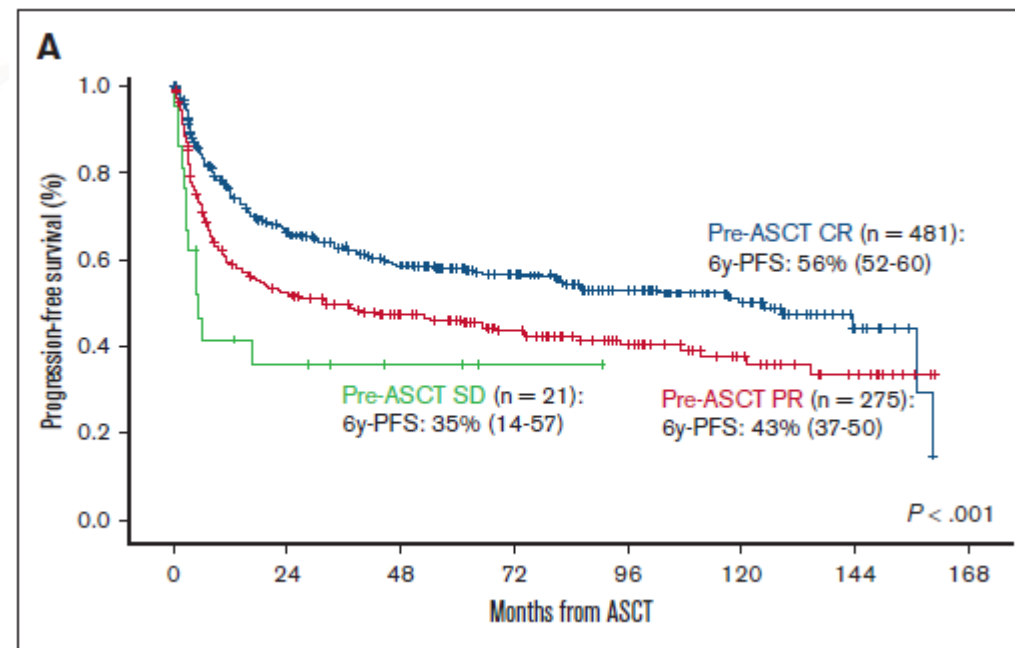
¶For superiority.

- Crump M, Kuruvilla J, Couban S, MacDonald DA, Kukreti V, Kouroukis CT, Rubinger M, Buckstein R, Imrie KR, Federico M, Di Renzo N, Howson-Jan K, Baetz T, Kaizer L, Voralia M, Olney HJ, Turner AR, Sussman J, Hay AE, Djurfeldt MS, Meyer RM, Chen BE, Shepherd LE. Randomized comparison of gemcitabine, dexamethasone, and cisplatin versus dexamethasone, cytarabine, and cisplatin chemotherapy before autologous stem-cell transplantation for relapsed and refractory aggressive lymphomas: NCIC-CTG LY.12. J Clin Oncol. 2014 Nov 1;32(31):3490-6. doi: 10.1200/JCO.2013.53.9593. Epub 2014 Sep 29. PMID: 25267740.

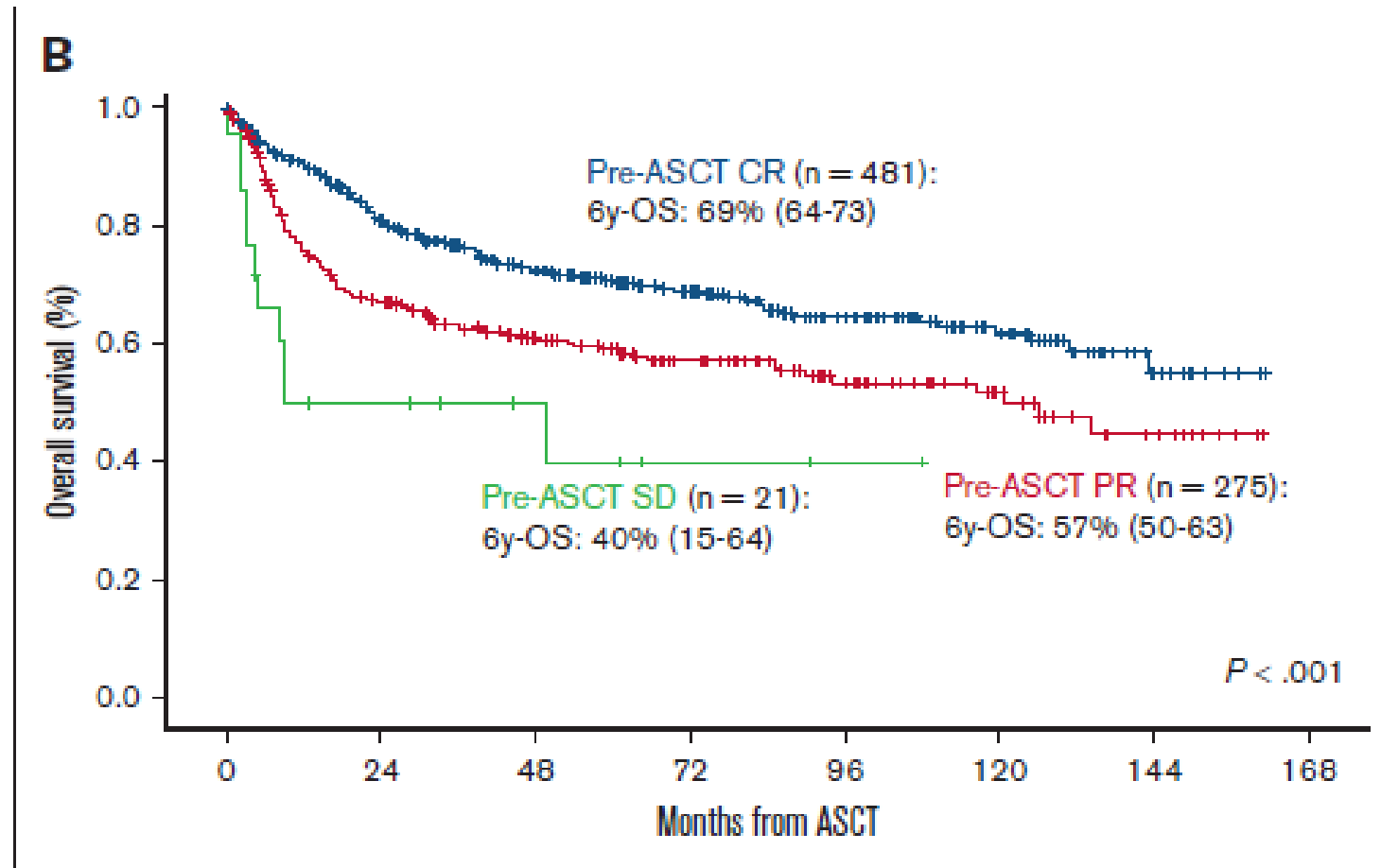


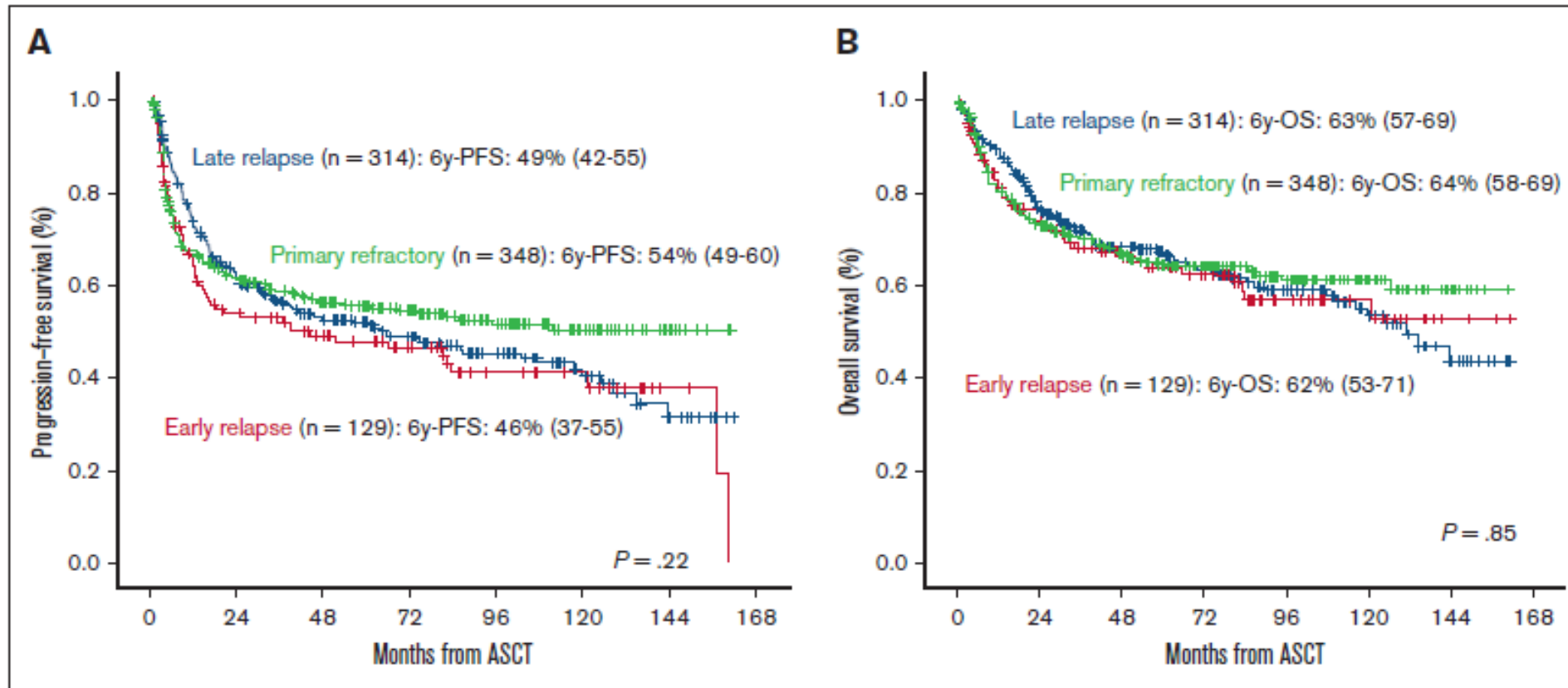
PR es mejor de PD

- No olvidar que PR en DLBCL no es despreciable!
- No perder la respuesta (aunque sea parcial) persiguiendo una mejor respuesta con otra línea adicional



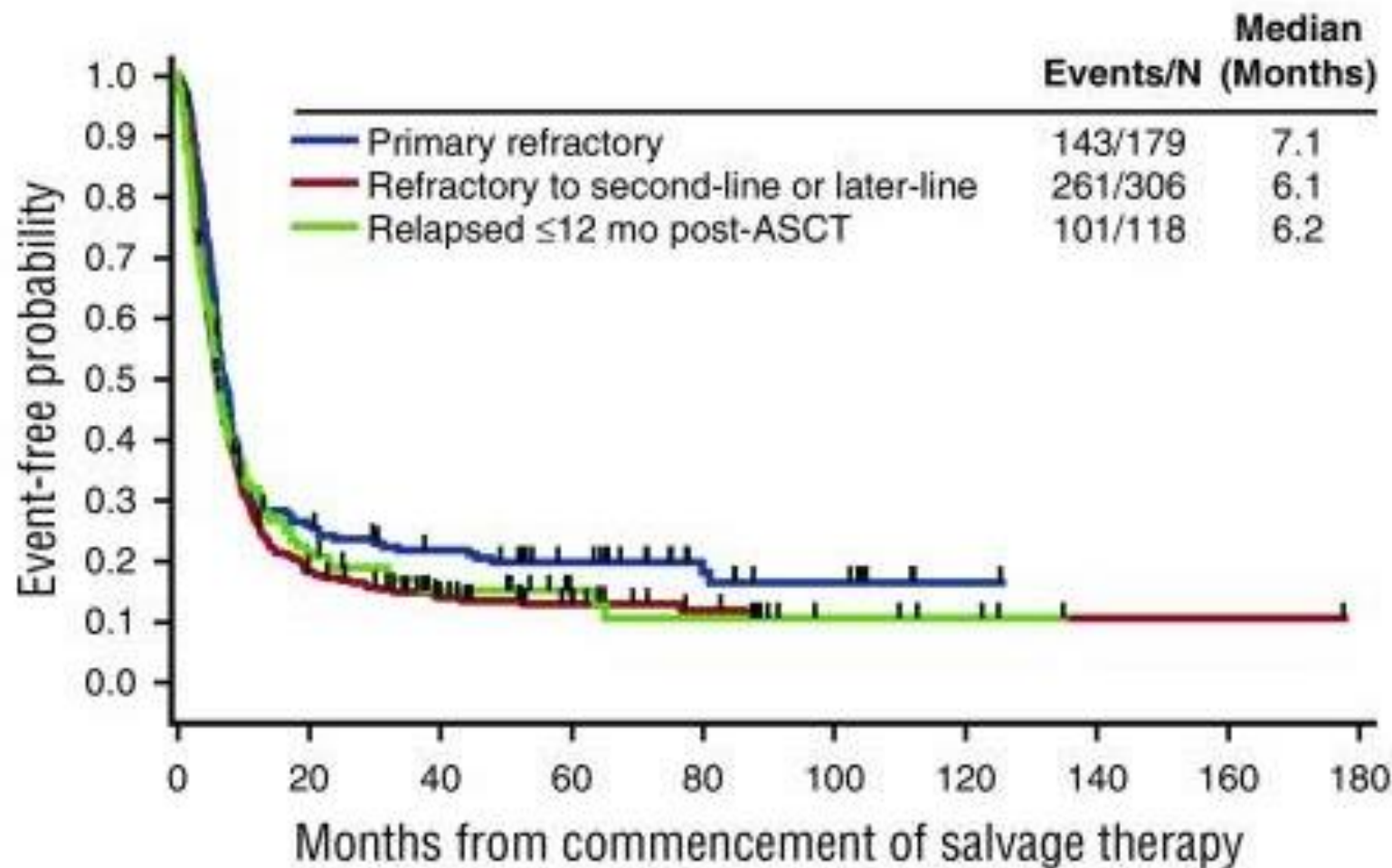
- Leyre Bento, Antonio Gutiérrez, Carmen Martínez, María Consejo Ortí Verdet, Marina Sorribes, Ana Carolina Caballero, Marta Peña, Ariadna Pérez, Ana Jiménez-Ubieto, Lucía Medina, Mariana Bastos-Oreiro, Paula Fernández Caldas-González, Belén Navarro, Isabel Salcedo, Pau Abrisqueta, Ignacio Español, Javier Cornago, Fernando Martín-Moro, Lucía García, Pilar Gómez, María Rosario Varela, María Puente, Joud Zanabali, Teresa Zudaire, Izaskun Zeberio, Raquel del Campo, Leslie González, Pedro González, Cristina Blázquez, Jordina Rovira, Marta Sitges, Mireia Franch-Sarto, Almudena Cabero, Alberto Mussetti, Juan Montoro, Antonia Sampol, Anna Sureda, Dolores Caballero, Alejandro Martín García-Sancho; and GELTAMO (Grupo Español de Linfoma y Trasplante Autólogo), Autologous stem cell transplantation for relapsed/refractory large B-cell lymphoma: a multicenter GETH-TC/GELTAMO study. *Blood Adv* 2025; 9(13): 3281-3292. doi: <https://doi.org/10.1182/bloodadvances.2024015415>







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Crump M, Neelapu SS, Farooq U, Van Den Neste E, Kuruvilla J, Westin J, Link BK, Hay A, Cerhan JR, Zhu L, Boussetta S, Feng L, Maurer MJ, Navale L, Wiezorek J, Go WY, Gisselbrecht C. Outcomes in refractory diffuse large B-cell lymphoma: results from the international SCHOLAR-1 study. *Blood*. 2017 Oct 19;130(16):1800-1808. doi: 10.1182/blood-2017-03-769620. Epub 2017 Aug 3. Erratum in: *Blood*. 2018 Feb 1;131(5):587-588. doi: 10.1182/blood-2017-11-817775. PMID: 28774879; PMCID: PMC5649550.



Realidad

- A 250000 USD por terapia CART teniendo en cuenta cifras epidemiológicas regionales Paraguay necesita unos 75-100 CARTs por año (en las indicaciones aprobadas)
- 18 millones USD por año
- CART Académicas 1/5 del precio



OUTCOMES OF CAR T-CELL THERAPY VERSUS AUTOLOGOUS HSCT IN PATIENTS WITH LARGE B-CELL LYMPHOMA IN COMPLETE REMISSION: AN ANALYSIS FROM THE EBMT LYMPHOMA WORKING PARTY

Población: LBDCG en RC post-rescate (≥ 2 líneas previas para auto-TPH, ≥ 1 para CAR-T)

N: 189 CAR-T vs 2.543 auto-TPH

Hallazgos principales: CAR-T: mayor recaída a 1 año (30,1% vs 22,1%). SLP y SG: similares entre grupos, sin diferencias significativas

Seguridad (NRM): baja y comparable

En pacientes fit y en RC, el auto-TPH ofrece control duradero comparable o superior en términos de recaída temprana

Dulery, R., Fekom, M., Thieblemont, C., Clesham, K., Nicholson, E., Blaise, D., Herbaux, C., Ghesquieres, H., Zuckerman, T., Wilson, K., Illes, A., Potter, V., Lioure, B., Glass, B., Saidy, A.O. and Bazarbachi, A. (2025), 77 | OUTCOMES OF CAR T-CELL THERAPY VERSUS AUTOLOGOUS HSCT IN PATIENTS WITH LARGE B-CELL LYMPHOMA IN COMPLETE REMISSION: AN ANALYSIS FROM THE EBMT LYMPHOMA WORKING PARTY. Hematological Oncology, 43: e77_70093. <https://doi.org/10.1002/hon.70093>



FIRST DISCLOSURE OF EPCORITAMAB + R-ICE IN PATIENTS WITH RELAPSED/REFRACTORY DIFFUSE LARGE B-CELL LYMPHOMA (R/R DLBCL) ELIGIBLE FOR AUTOLOGOUS STEM CELL TRANSPLANTATION (ASCT): EPCORE NHL-2

Diseño: Ensayo NHL-2, epcoritamab + R-ICE como rescate en R/R DLBCL elegible para ASCT.

Pacientes: N=31

Eficacia: 20/31 procedió al AutoTPH, 13 en CR y 7 en PR (de los cuales 5 alcanzaron CR luego del trasplante)

Seguimiento: A 6 meses: PFS estimada 74 %, OS 100 %

Seguridad: Neutropenia (74 %), anemia (68 %), trombocitopenia (68 %), CRS solo grado 1–2 (52 %)

Mensaje clave: Potencial para optimizar la terapia de rescate y aumentar acceso a ASCT frente a tasas históricas (~50 % de elegibles)



Muchas Gracias!