

HEMATOLOGY

Fas determines outcome in DLBCL

Diffuse-large B-cell lymphoma (DLBCL) is a particularly aggressive form of non-Hodgkin lymphoma. CHOP chemotherapy and rituximab have increased the response rates and survival outcomes in elderly patients with DLBCL. Many investigators have tried to identify prognostic factors for such patients to distinguish those with a favorable or unfavorable outcome and to select appropriate treatment strategies.

“...serum soluble Fas levels is a significant prognostic factor and could be a useful tool...”

Before the introduction of rituximab into clinical practice, Hara *et al.* reported that serum soluble Fas levels were prognostic. Now, the same group has shown that soluble Fas levels are prognostic in patients who receive rituximab-based CHOP chemotherapy. In total, 132 patients received CHOP

chemotherapy without rituximab (group A) and 75 received rituximab (group B). In group A, the complete response rates were 82% and 51% for patients with soluble Fas <3.0 and ≥3.0 ng/ml. The complete response rates did not differ significantly in patients with high or low soluble Fas levels in group B. The respective 5-year overall survival for patients with <3.0 and ≥3.0 ng/ml in group A was 66% and 33%. The 3-year overall survival for patients with <3.0 and ≥3.0 ng/ml in group B was 79% and 45%.

The researchers conclude that serum soluble Fas levels are a significant prognostic factor and could be a useful tool in the selection of appropriate treatment strategies.

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Original article Hara, T. *et al.* Serum soluble Fas level determines clinical outcome of patients with diffuse large B-cell lymphoma treated with CHOP and R-CHOP. *J. Cancer Res. Clin. Oncol.* 135, 1421-1428 (2009).