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AGGRESSIVE B-CELL LYMPHOMA AND THROMBOSIS

Sara Naim MD 1 , Soukaina Douma MD 1 , Amine Benmoussa MD 1 , Sophia BerradaMD 1 , Mouna Lamchahab MD 1 , Siham Cherkaoui MD 1 Meryem Qachouh MD 1 , Mohamed Rachid MD 1 , Abdelah Madani MD 1 ,Nisrine Khoubila MD 1

1 University Hospital IBN Rochd, Casablanca, Morocco.

IBN ROCHD ابن رشد Casablanca الدار البيضاء CHU

INTRODUCTION

There is considerable clinical and biological heterogeneity among the class of lymphoid malignancies, and it is unclear if particular non-Hodgkin lymphoma subtypes are associated with a higher risk of developing venous thromboembolic events (VTEs).

OBJECTIVE:

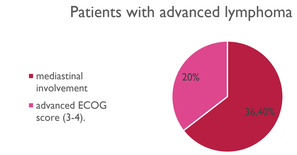
To assess the occurrence of VTEs in newly diagnosed patients with diffuse large B-cell lymphoma (DLBCL)..

METHOD

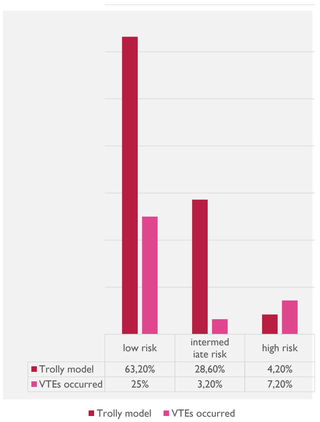
- **The study included all newly diagnosed adult patients with DLBCL who were monitored for a year at University Hospital IBN Rochd Hematology Department.**
- **The data were collected from a prospective single-institution descriptive cohort to determine the frequency of VTEs in patients with DLBCL beginning chemotherapy for 12 months from January 2023 to December 2023.**
- **The link between VTE and clinical variables was characterized using both univariate and multivariate analysis in R.**

RESULTS

The study comprised 49 patients from total of 292 (16.8%), 53% of patients presented with advanced lymphoma.



3 patients (6.2%) developed VTEs.



Patients classification according to the ThroLy model

variable	P-value
ECOG (3-4)	0.04
Age	0.4573
Hospitalisation	0.2803
ANN-Arbor	0.3018
Bulky	0.5229
Khorana/ThroLy	0.9095/0.3575

Using P= 0.05 as the threshold to determine if a variable is significant, we identified that only ECOG 3-4 (P=0.04) was a significant variable for VTEs.

CONCLUSIONS

In our study, the ThroLy score was not accurate for predicting VTEs in patients (P=0.58). Patients with DLBCL and poor performance status at diagnosis were at high risk for developing VTE especially early in the course of treatment

According to a Japanese study, age 60 or over, Eastern Cooperative Oncology Group performance status 2, 3, or 4 and International Prognostic Index high or high-intermediate were identified as risk factors for developing VTE (1),

REFERENCES

1 **Yokoyama,K et al**. Incidence and risk factors for developing venous thromboembolism in Japanese with diffuse large b-cell lymphoma, 2021 Jul; 130:7-11

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CONTACT INFORMATION

s.naim2528@gmail.com

soukainadouma@gmail,com