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Burkitt's lymphoma (BL) responding to rituximab-cyclophosphamide-vincristine-dexamethasone-lenalidomide: Time for a paradigm shift?

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INTRODUCTION

Burkitt lymphoma (BL) is an aggressive B-cell lymphoma treated with dose-intensive chemoimmunotherapy.

We report a BL patient response to a reduced-intensity anthracycline-free regimen.

To open the discusión about paradigm changes.

change.

When is it justified to consider a paradigm change?

Can one single clinical case open such discussion?

CASE DESCRIPTION

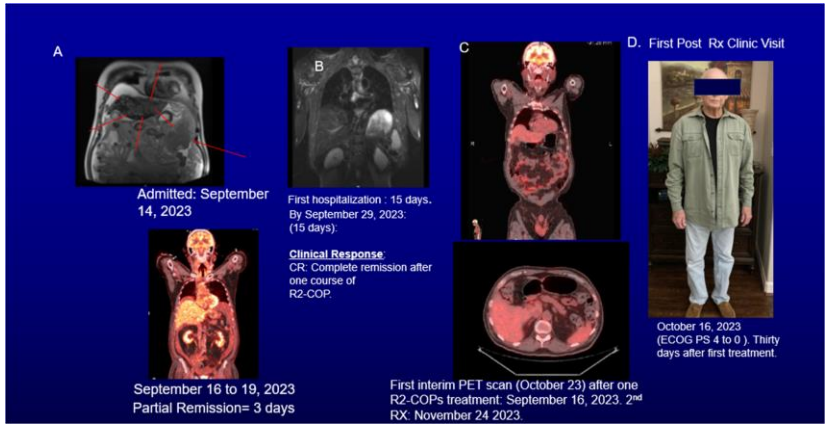
A 77-year-old male with a history of transaortic valve replacement and coronary artery disease presented with ascites, bilateral pleural effusions, and compressive atelectasis requiring intubation.

Imaging revealed liver rim-enhancing lesions and up to 7.3 x 5.4 cm, 8.8 x 6.2 cm transverse colon mass. Had diffuse peritoneal/omental and retroperitoneum carcinomatosis, intrarenal, perinephric, and skeletal metastasis. Extubating is accomplished after ascites drainage and continuous renal replacement therapy. A biopsy of the colonic mass revealed high-grade, germinal center-like B-cell lymphoma. Proliferative index > 90% by Ki67. Due to cardiac condition, received anthracycline-free chemoimmunotherapy, developed at our hospital for elderly patients with DLBCL (Rituximab 375mg/m2-cyclophosphamide 750 mg/m2-vincristine capped at 1mg-dexamethasone 40mg IV daily for four days-lenalidomide10mg daily for 21 days, R2-COP. Lenalidomide subsequently increased to 25mg a day for 21 days once renal function returned to normal).

The next day pathology confirmed a BL, EBER negative.

Three days later, the PET CT scan showed a partial response.

The patient has completed six R2-COP treatments. In CR by PET CT scan. Nine months later, still in complete remission (CR).





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Nine (9) months later the patient remains in complete remission and totally asymptomatic.

Conclusions

Paradigms are 'universally recognized scientific achievements that temporarily provide model problems and solutions to a community of practitioners'

When events or 'anomalies' no longer fit the expected pattern the original 'paradigm' has to be rethought.

The final diagnosis of BL evidenced an 'anomalous unexpected situation', deserving of 'consideration for a paradigm shift'.

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