



## The 65th ASH Annual Meeting Abstracts

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## 627.AGGRESSIVE LYMPHOMAS: CLINICAL AND EPIDEMIOLOGICAL

**Hypofractionated Radiotherapy in Aggressive B-Cell Lymphoma**Ting-Bo Liu, MD<sup>1</sup>, Xiaofan Li, MD PhD<sup>2</sup><sup>1</sup>Fujian Medical University Union Hospital, Fuzhou, CHN<sup>2</sup>Union Clinical Medical Colleges, Fujian Medical University, Fuzhou, China

**Background and purpose:** Radiotherapy (RT) is an effective and available local treatment for patients with refractory or relapsed (R/R) aggressive B-cell lymphomas. However, the value of comprehensive hypofractionated RT in this setting has not been confirmed.

**Materials and methods :** We retrospectively analyzed patients with R/R aggressive B-cell lymphoma who received comprehensive hypofractionated RT between January 2020 and August 2022 at a single institution. The objective response rate (ORR), overall survival (OS), progression-free survival (PFS) and acute side effects were analyzed.

**Results :** A total of 30 patients were included. The median dose for residual disease was 36 Gy, at a dose per fraction of 2.3-5 Gy. After RT, the ORR and complete response (CR) rates were 90% and 80%, respectively. With a median follow-up of 10 months (range, 2-27 months), 10 patients (33.3%) experienced disease progression and three died. The 1-year OS and PFS rates for all patients were 81.8% and 66.3%, respectively. The majority (8/10) of post-RT progressions involved out-field relapses. Patients with relapsed diseases, no response to systemic therapy, multiple lesions at the time of RT, and no response to RT were associated with out-field relapses. PFS was associated with response to RT ( $P=0.001$ ) and numbers of residual sites ( $P<0.001$ ). No serious non-hematological adverse effects ( $\geq$  grade 3) associated with RT were reported.

**Conclusion:** These data suggest that comprehensive hypofractionated RT was effective and tolerable for patients with R/R aggressive B-cell lymphoma, especially for those that exhibited localized residual disease.

**Disclosures** No relevant conflicts of interest to declare.

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