

Treatment of tumor-stage disease in mycosis fungoides: a retrospective, longitudinal analysis

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Introduction

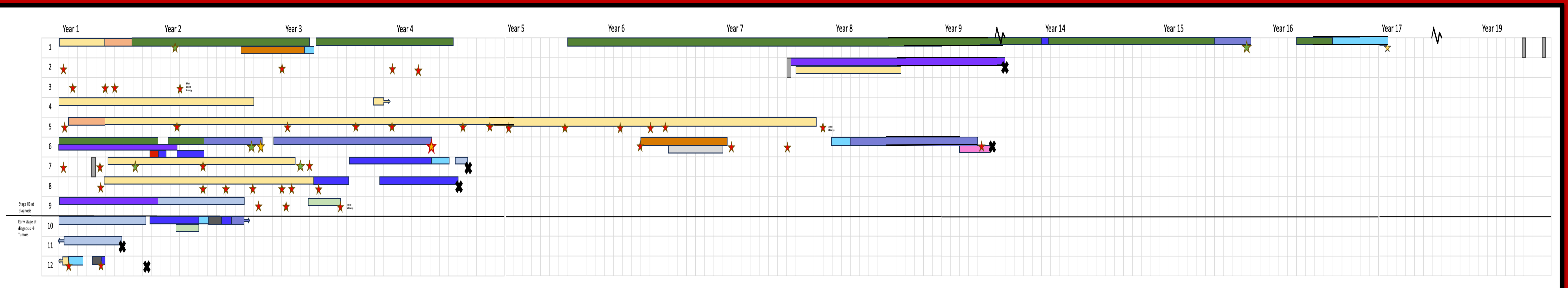
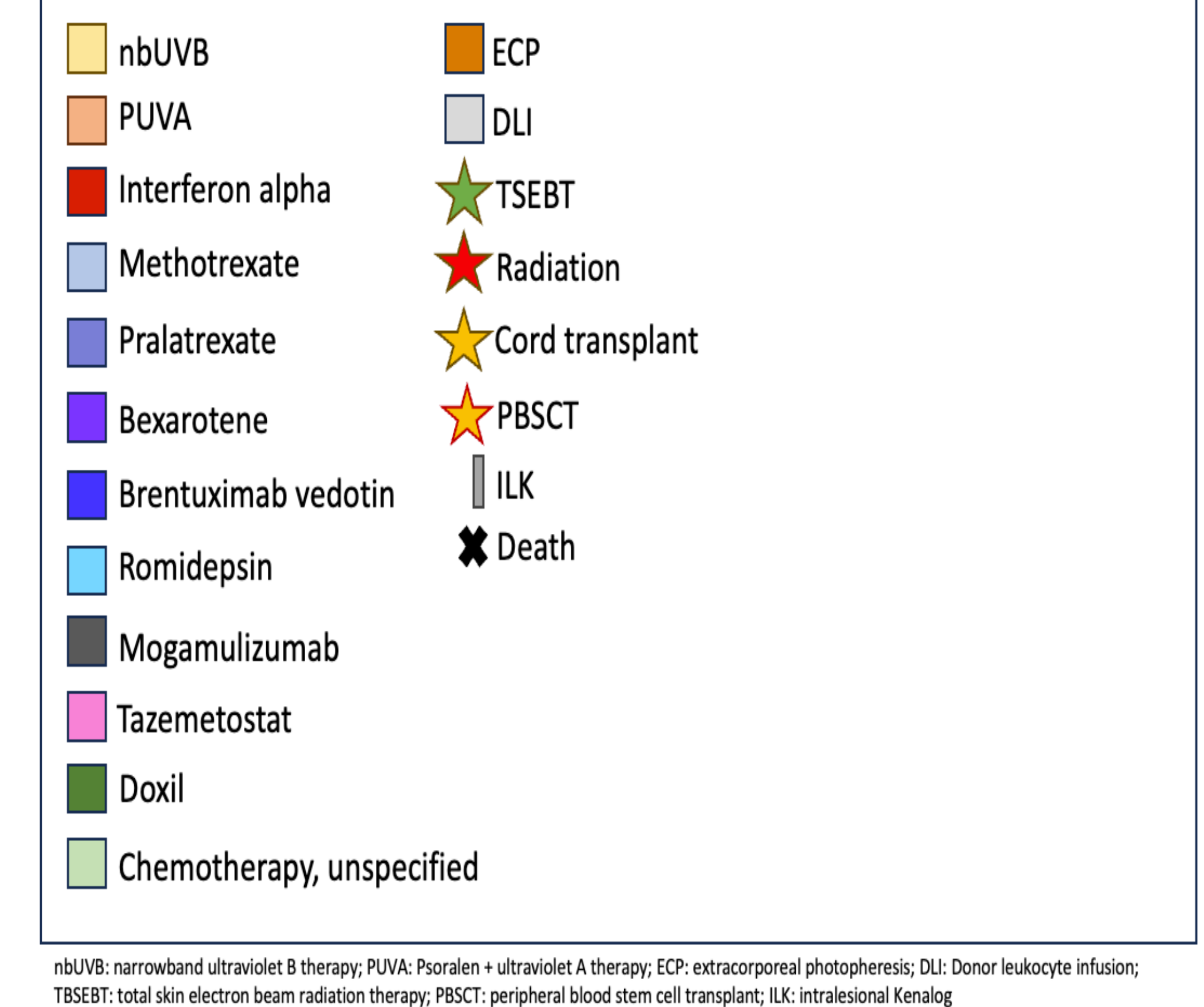
Mycosis fungoides (MF) is a type of non-Hodgkin's lymphoma with primarily cutaneous manifestations. Stage IIB disease is defined by the presence of tumors on the skin and is considered advanced stage disease. While new therapies have been approved and guidelines have been proposed to direct their use, there is still considerable ambiguity in the optimal treatment choice and subsequent trajectory for patients with tumor-stage disease. The aim of this paper is to demonstrate these detailed treatment trends and resulting patient outcomes within our institution.

Materials and methods

Using billing codes, we screened patients seen by our tertiary medical center's lymphoma service for management of cutaneous lymphoma, and patient medical records were analyzed. Mann-Whitney U tests, Fisher's exact tests, and Chi-Squared tests were utilized for testing associations among different variables.

Results

Please see the figure below for graphic illustration of treatment trends. Ten patients were initially diagnosed with stage IIB disease, and four patients with early stage disease went on to develop tumors, for a total of 14 patients. Six out of the 12 patients (50%) had died at the time of data collection, and 2 (16.7%) were lost to follow-up. Eight patients (61.5%) had progressive disease, three patients had stable disease (23.0%), and two were lost to follow-up (15.3%). There were no statistically significant differences in treatment selection between patients with stable versus progressive disease, with the exception of HDAC inhibitors and targeted therapy, both of which were associated with progressed disease (p values of 0.031, 0.008, respectively).



Conclusions

Disease progression likely played a role in therapy selection, as many of the patients had progressed on prior therapies before starting these medications. In this retrospective, longitudinal study, we provide granular details on the treatment courses of patients with tumor-stage MF. By illuminating the nuance of treatment within the even smaller cohort of patients with tumor-stage disease, this study highlights that even with a broad spectrum of treatment strategies, patients often can be recalcitrant to treatments tried and it is difficult to effectively halt disease progression.

