

Improvement of Cutaneous Anaplastic Large Cell Lymphoma by Brentuximab Vedotin Monotherapy

Kutanöz Anaplastik Büyük Hücreli Lenfomada Brentuksimab Vedotin Monoterapisi ile Düzelme

© Takashi Onaka¹, © Tomoya Kitagawa¹, © Chika Kawakami², © Akihito Yonezawa¹

¹Kokura Memorial Hospital, Clinic of Hematology, Kitakyushu, Fukuoka, Japan

²University of Occupational and Environmental, Department of Dermatology, Fukuoka, Japan

Brentuximab vedotin (BV) is an antibody-drug conjugate composed of a CD30-directed monoclonal antibody and monomethyl auristatin E [1]. BV monotherapy showed good response rates for cases of refractory and relapsed anaplastic large cell lymphoma (ALCL), but only a few case reports are available for cutaneous localized ALCL (cALCL). We herein report the treatment with BV of relapsed cALCL with an excellent response. An 82-year-old female with relapsed cALCL had generalized erythema accompanied by desquamation and could not extend her fingers enough (Figure 1), with no lymph node lesions. Due to the previous treatment with radiation, steroid ointment, and systemic chemotherapy, we chose BV monotherapy for her, dosing at 1.8 mg/kg every 21 days. After the third infusion, her generalized erythema and her finger movement were improved (Figure 2). She did not have any severe adverse effects or infusion reaction except for hematologic toxicity (leukocytopenia). She has finished 6 courses of BV infusion and maintained remission of skin lesions. There are several reports that showed the effectiveness of BV treatment for cALCL [2,3], but the optimal treatment interval and cycles, and the necessity of maintenance therapy by using BV, are unclear. Further studies are needed to evaluate BV treatment in cases of cALCL.



Figure 1. Generalized erythema accompanied by desquamation before treatment with brentuximab vedotin.



Figure 2. Improvement of skin erythema accompanied by desquamation after 4 cycles of brentuximab vedotin.

Keywords: Brentuximab vedotin, Cutaneous ALCL

Anahtar Sözcükler: Brentuksimab vetodin, Kutanöz ABHL

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