

**The characteristics of Hodgkin lymphoma
patients registered in the French African
pediatric oncology group (GFAOP)
hospital-based registry**

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Conflict of interest

Nothing to disclose

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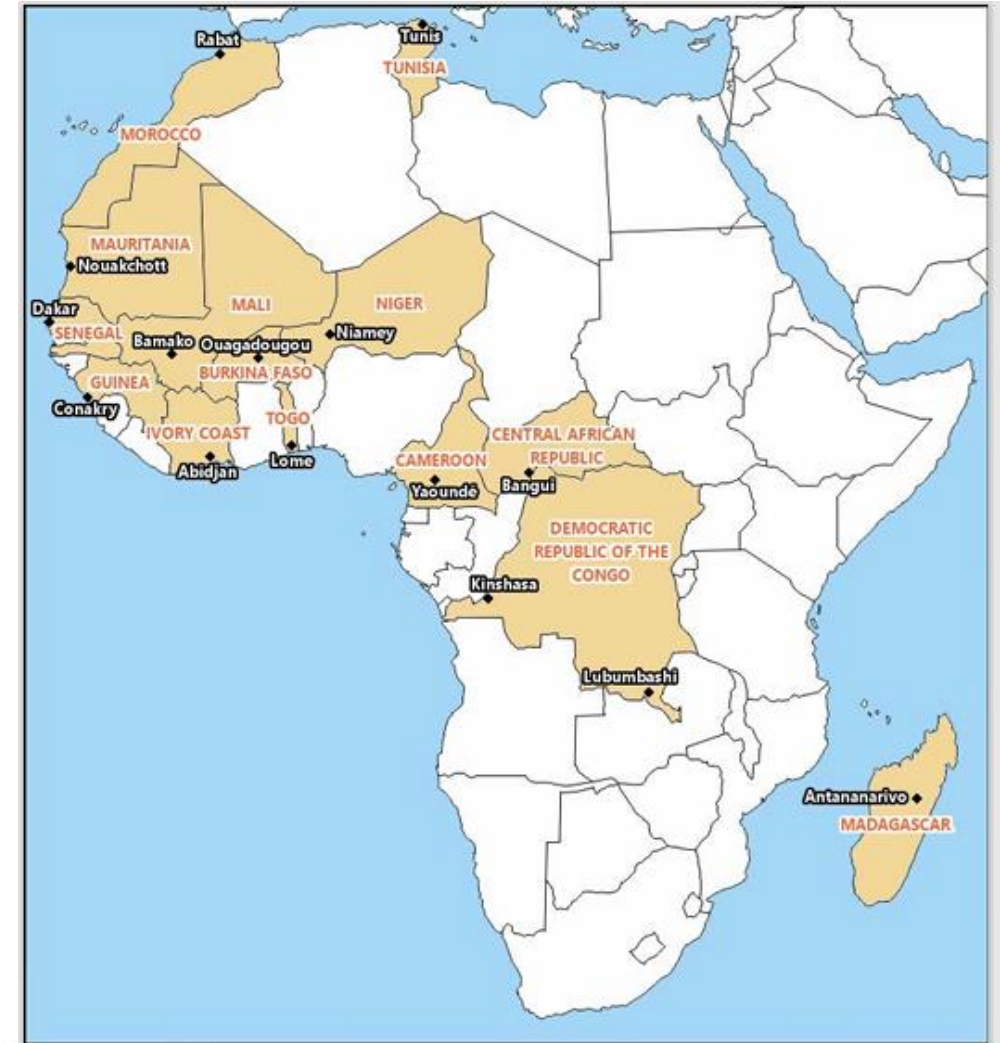
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Introduction (1)

- Hodgkin lymphoma (HL) is a malignant but highly curable tumor with 90% OS in high-income countries.
- OS at 82% was shown in the first HL GFAOP 2006 study using data from 2006 to 2012 from 6 sub-Saharan Pediatric oncologist units (POU). Patients were treated with chemotherapy only, based on COPP/ABV regimen
- In the following recommendations in 2019, the GFAOP LH committee choose to propose either chemotherapy type AVD and corticoid, or OEPA COPDAC \pm radiotherapy, according to the unit facilities.
- Here we describe the characteristics of children attending 15 GFAOP POU and attempt to look at outcome for this group and hopefully identify progress and different pathways for improvement.

Methods (1) POU participation and population

- This was a multicenter retrospective and descriptive study
- Data was extracted from the centralized data base for all patients ≤ 18 years with a suspicion of a HL registered between 01/01/2017 to 31/12/2021
- All patients admitted with a clinical suspicion of HL were registered.
- Patients with histological confirmation of the diagnosis were analysed.
- An e-mail was sent to different unit heads and clinical research associates to request additional information. We had a return rate of 54%.



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Methods (2)

Variables:

- Patient characteristics: registration unit, age, sex,
- Clinical manifestations, confirmation of diagnosis by histology, disease extension and stage.

Analysis:

- We performed a univariate descriptive analysis.
- OS was evaluated using Kaplan Mayer method with the date of diagnosis or if missing the date of treatment and the date of last contact or date of death.

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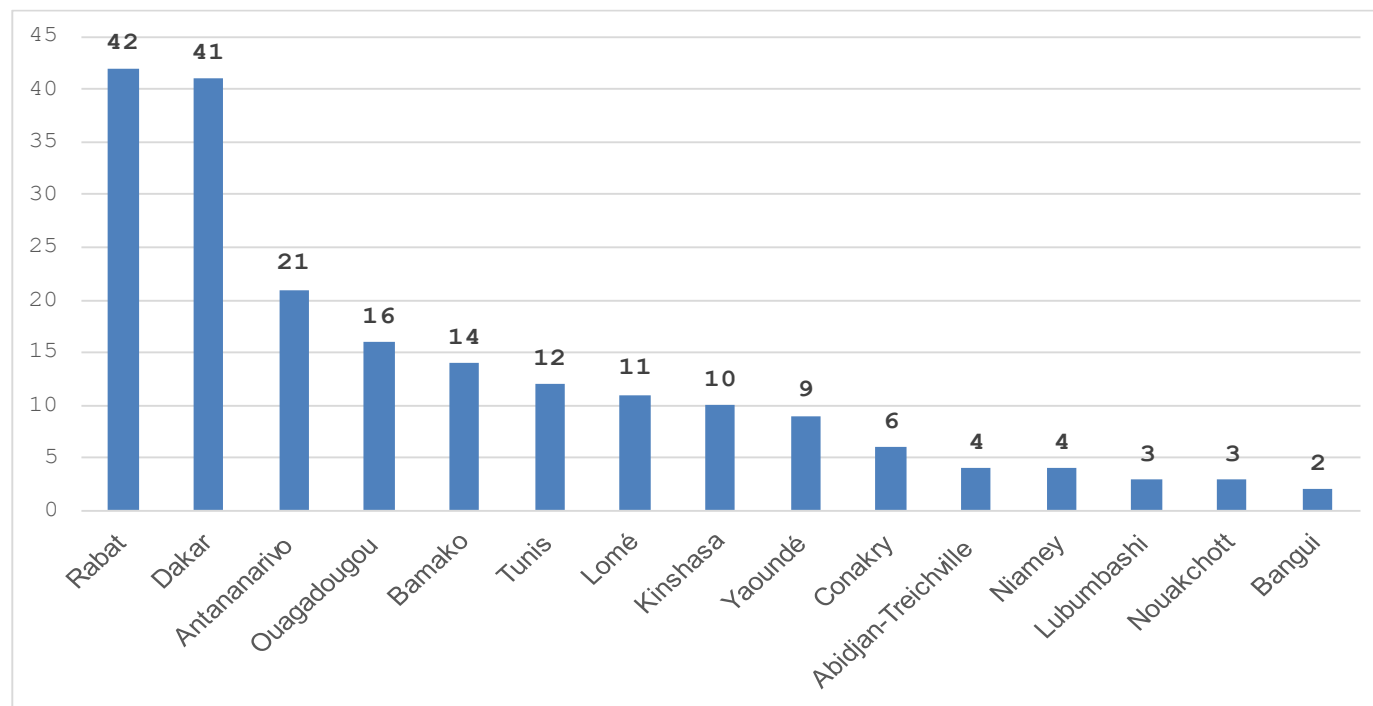


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Résultats (1)

- The median age of patients was 10 years, with a minimum of 2 years and a maximum of 17.5 years.
- 40% of patients were in the 5 to 9 age group, followed by 38% in the 10 to 14 age group.
- The sex ratio is 3.7, 42 girls and 157 boys.

204 patients were registered with a suspicion of HL
198 had pathological confirmation of diagnosis



Results (2)

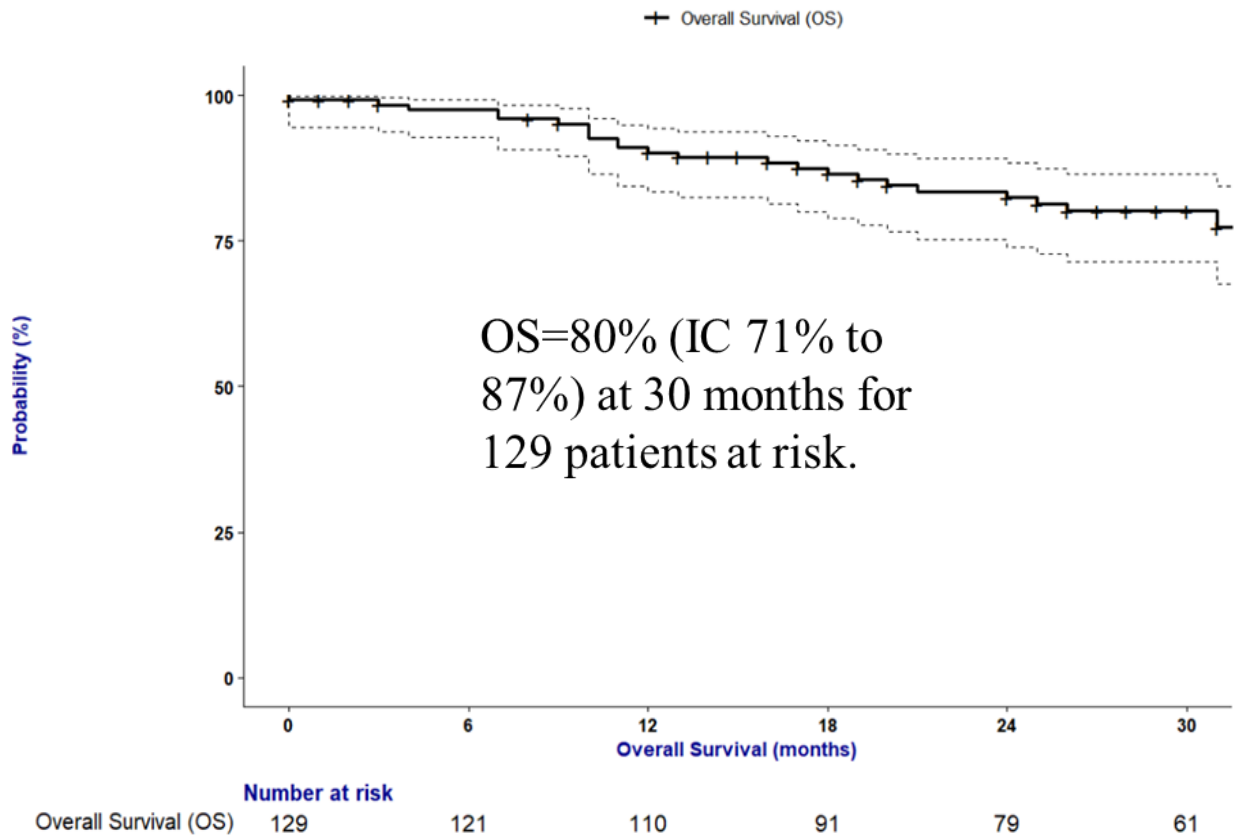
- 162 (82%) of the 198 diagnosed patients were staged.
 - 13 (8%) stage I, 56 (35%) stage II, 66 (41%) stage III, 27 (16%) stage IV
- 154 (95%) of staged patients were treated.
 - 20 (13%) discontinued treatment and 21 (14%) died
- 149 patients were declared treated according to GFAOP protocols:
 - 92 HODGKIN GFAOP 2006,
 - 57 GFA LH 2019

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Results (3)



Of the 154, staged and treated patients, 25 (16%) lacked essential dates or status and were excluded from analysis.

Stage	Overall Survival				
	6 Mois	12 Mois	18 Mois	24 Mois	30 Mois
Stage I-II	98% (88%, 100%)	95% (84%, 98%)	91% (79%, 96%)	89% (76%, 95%)	89% (76%, 95%)
Stage III-IV	97% (89%, 99%)	87% (76%, 93%)	83% (72%, 90%)	77% (65%, 86%)	73% (59%, 83%)

Significant difference ($p=0.022$) in survival for stage I-II and Stage III-IV was observed

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Discussion (1)

- Concerning age, the population is almost identical to HL GFAOP 2006 study
- Both show a male predominance, which corresponds to previously published studies.
- Both show high proportions of stage III and IV. However 14% of diagnosed patients were not staged. So results might be different if we had the stage of all patients.
- Diagnosis at advanced stages remains a problem in Africa. To overcome this, measures are being taken to ensure early diagnosis.

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Discussion (2)

- Unlike the first study where HL GFAOP 2006 was the only protocol used.
- These results of 80% OS are almost the same as in the HL GFAOP 2006 and are very encouraging because they concern results from a registry.
- The time covered included the COVID pandemic where access to services and availability of medication was limited.
- However, it is difficult to make a comparison on survival given that the patients were treated with different recommendations.
- And we are comparing data from a registry to a clinical study where all treatment was available for analysis. The data used here is from a registry and only the notion of chemotherapy given, is known.

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Conclusion

- This study provides an overview of the current state of care before the application of the new GFAOP HL recommendations.
- Contacting POU to improve information on treatment administered is necessary to improve this research work.

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