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**The use of small doses of gemcitabine in the treatment of drug-resistant forms of mycosis fungoides/Sézary syndrome**

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Mycosis Fungoides (MF) and Sezary Syndrome (SS) are the most frequent cutaneous T-cell lymphomas. These tumors have a chronic progradient course. Hitherto there is no evidence of effective therapy, particularly of the late-stage of the diseases.

About 30% of the patients are not effected by interferon, radiotherapy and combined treatment regimens. Patients' age (median age – 62 years) limits therapy options. Several lines of previous treatment could lead to tumor resistance and higher accumulated toxicity. Thus, use of potentially effective chemotherapeutic agents in lower doses will reduce myelotoxicity and expand the cohort of patients. Gemcitabine is an effective medication in treatment of MF/SS. Its efficacy is preserved in small doses with prolonged duration of infusion and allows to decrease myelotoxicity. It was firstly discovered in therapy of solid tumors.

In current study 14 patients were involved with resistant forms of MF/SS (10 patients with MF 3 – with SS, and 1 case of MF with transformation into large cell lymphoma). We used 6-hour infusion of gemcitabine at dosage of 250 mg/m<sup>2</sup>. 86% of patients achieved a general response: 29% complete remission, 50% - partial remission, 21% - stabilization of disease, 14% (2 patients)-progression.

Present study showed promising results in treatment of patients with advanced stages of MF/SS which had at least two preceding lines of therapy without an effect. Common response (PR/CR) was received in high percent of cases. This treatment protocol is reproducible in elderly patients. For long-term conclusions further studies are required.

**Presented by:** Gorenkova, Liliya

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**Topic/s:**

T5 - New Therapies – Clinical

Local meeting in Russia