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Options for preserving reproductive function in patients with Hodgkin's lymphoma receiving dose-intensive chemotherapy

Edward R. Biyachuev, Aleksey V. Pshonkin, Svetlana V. Minenko, Vadim V. Ptushkin

Federal Scientific Clinical Center of Pediatric Hematology, Oncology and Immunology, Moscow, Russia

Correspondence: Edward R. Biyachuev, Federal Scientific Clinical Center of Pediatric Hematology, Oncology and Immunology, 117/2, Leninsky pr., 117997, Moscow, Russia, E-mail: edvard_78_ru@mail.ru

Abstract

The extreme importance of preserving ovarian function in women at their reproductive age is beyond any doubt. Unfortunately, the intensive application of cytostatic regimens, especially those containing alkylating agents, is accompanied by a loss of ovarian activity. In recent years, some methods of pharmacological ovarian protection, such as combining oral contraceptives and LHRH agonists have been widely introduced. However, the efficiency of these therapeutic approaches has not yet been defined for the patients with Hodgkin's lymphoma undergoing a dose-intensive BEACOPP-14 treatment protocol.

Hence, the purpose of our study was to monitor fertility-related function in patients at their reproductive age after their exposure to dose-intensive chemotherapy (BEACOPP-14 regimen), accompanied by pharmacological inhibition of their ovarian function.

A study group included sixteen patients with Hodgkin's lymphoma (clinical stage IIIA–IVB), whose median age was 22 years (16 to 26 years old). All patients underwent the BEACOPP-14 regimen (8 rounds, at the total dose of cyclophosphamide exceeding 8g). Menstrual dysfunction was not reported in any patient before treatment. Occasional gynecological pathology was noted in two cases before treatment (chronic adnexitis without exacerbations).

Fourteen patients received a combination of oral contraceptives (regulon, repeated administration during the entire treatment course), and two patients were treated with Zoladex, an analogue of natural luteinizing hormone-releasing hormone (a single injection every 28 days). Examination of the patients was performed repeatedly, and their hormonal profile was evaluated at 3 months and 6 months post-treatment. Restoration of regular menstrual functions and hormonal profile were noted in all patients, both at 3 and 6 months.

According to our results, pharmacological ovarian protection techniques allowed an efficient and high-quality maintenance of menstrual function in patients with Hodgkin's lymphoma subjected to intensive chemotherapy.

Keywords: Hodgkin disease, intensive therapy, cyclophosphamide, ovarian cycle, hormonal profile, pharmacological protection

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