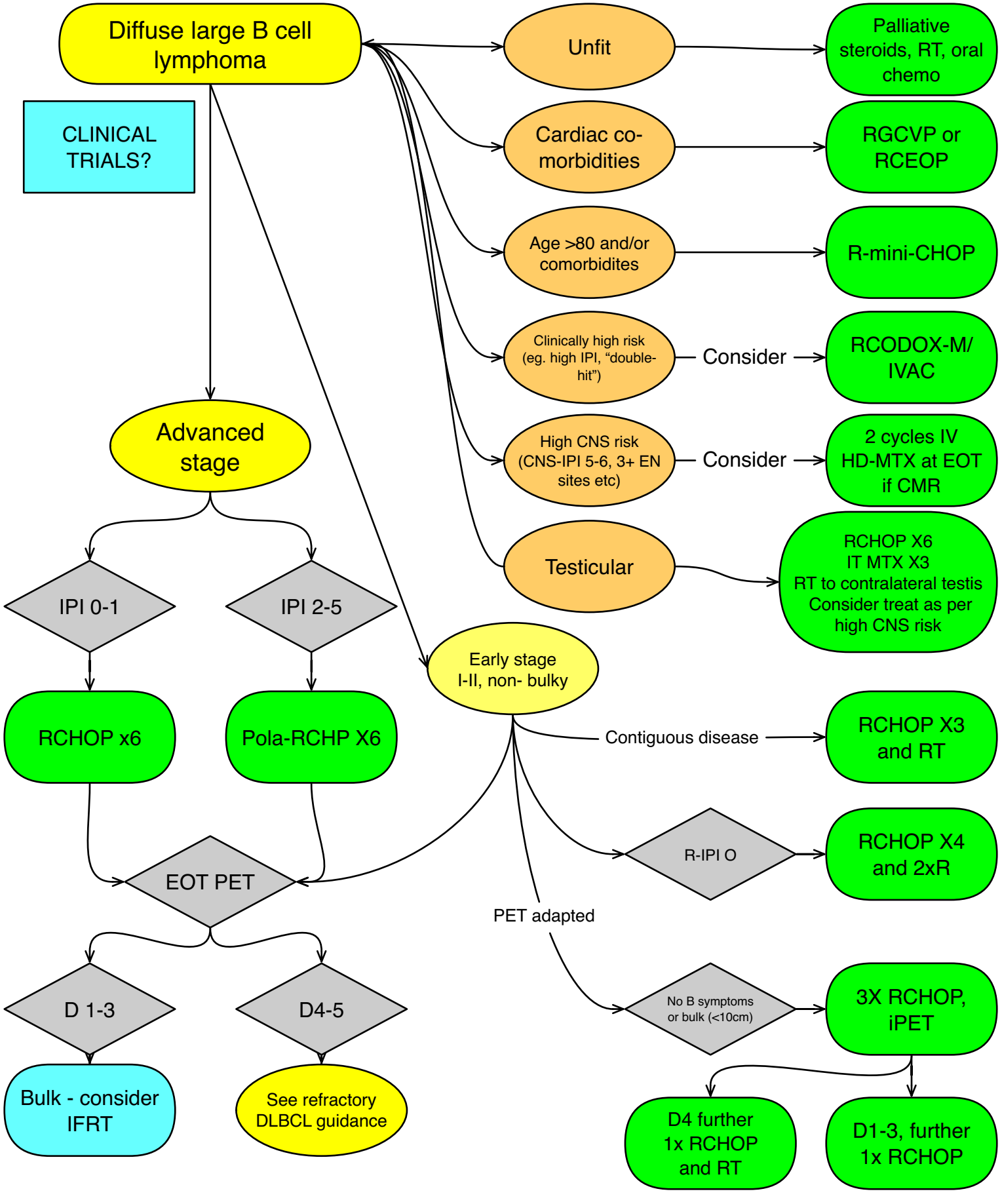
Diffuse large B cell lymphoma
CLINICAL TRIALS?
Unfit
Palliative steroids, RT, oral chemo
Cardiac co-morbidities
RGCVP or RCEOP
Age >80 and/or comorbidites
R-mini-CHOP
Clinically high risk (eg. high IPI, "double-hit")
Consider
RCODOX-M/ IVAC
High CNS risk (CNS-IPI 5-6, 3+ EN sites etc)
Consider
2 cycles IV HD-MTX at EOT if CMR
Testicular
RCHOP X6
IT MTX X3
RT to contralateral testis
Consider treat as per high CNS risk
Advanced stage
IPI 0-1
IPI 2-5
RCHOP x6
Pola-RCHP X6
EOT PET
D 1-3
D4-5
Bulk - consider IFRT
See refractory DLBCL guidance
Early stage I-II, non- bulky
Contiguous disease
RCHOP X3 and RT
R-IPI O
RCHOP X4 and 2xR
PET adapted
No B symptoms or bulk (<10cm)
3X RCHOP, iPET
D4 further 1x RCHOP and RT
D1-3, further 1x RCHOP