Dear members of the NLG society,

All members of NLG and representatives of collaborating companies are welcome to the next NLG Plenary meeting October 23-24, 2014 in Stockholm. The preliminary program of the meeting and information on the venue of the meeting are enclosed. Scientific papers and case presentations will be presented from all countries as in previous years. Especially young colleagues are encouraged to send abstracts and join the NLG activities. Clinical and translational research on lymphoma is our joint task: new ideas, treatment strategies and interesting high-level guest lectures will be presented in NLG plenary meeting.

Looking forward seeing you all in Stockholm

Sincerely,

Sirkku

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NLG Plenary meeting, collaborative companies:

- Boehringer-Ingelheim
- Celgene
- CTI
- Gilead
- Janssen-Cilag
- Mundipharma
- Roche
- Sanofi
- Spectrum-Pharma
- Takeda
NLG Plenary meeting

The venue of the meeting will be Hotel J in Stockholm's Newport by waterfront in Nacka Strand. See: http://www.hotelj.com/en/

The congress hotel is just a 15 min drive from Stockholm T-centralen. A regional train runs from Arlanda airport to T-centralen. From T-centralen, take taxi or subway to Slussen and change to bus 443.

A bus transport will be arranged from Arlanda Terminal 5 to the hotel 10:30 on Oct 23rd and back to Arlanda from the meeting 13:15 on Oct 24th.

Collaborative companies are welcome and may send representatives as agreed with the coordination group.

Working group meetings may be arranged in Wednesday evening Oct 22nd, 2014, and Thursday morning Oct 23rd.

All members of the working groups have a possibility to participate the meeting, and at least one delegate from every NLG study centre. Registration via national coordinators until October 1, 2014.

Recommended number of delegates from each country:

- Denmark 15
- Sweden 35
- Norway 15
- Finland 15

Abstract submission

Please send your abstract and case presentation before October 1 to your national member of the NLG coordination group.

Free papers session

Scientific papers on on-going lymphoma research form each country are appreciated and will be presented in this session.

Interesting cases session

As previous years, we have one session on interesting and difficult cases. One patient from each country can be presented and we welcome especially younger delegates to present challenging cases.

Young scientists and PhD-students are encouraged to send abstracts in these sessions to their national representatives. Active participants will have their travel expenses paid by NLG.
NLG Plenary meeting, Stockholm, Hotel J

Thursday 23.10.2014

11.00-11.30 Registration
11.30-12.15 Lunch

Session I.

12.15-13.30 Interesting cases
13.30-15.00 Free papers
15.00-15.20 Coffee

Session II.

15.20-16.20 Educational lecture: Epidemiology of lymphomas, Karin Ekström-Smedby, MD, PhD, Clinical Epidemiology Unit, Department of Medicine, Karolinska Institutet, Stockholm, Sweden

Session III.

16.20-17.00 Large cell group
17.00-17.30 T-cell group
17.30-18.00 Hodgkin group
18.00-19.00 Business meeting
20.00 Dinner

Friday 24.10.2014

Session IV.

9.00-10.00 Invited speaker: CAR T cell therapies in hematological malignancies, David Porter, MD, PhD, Department of Medicine, Perelman School of Medicine at the University of Pennsylvania, Philadelphia, USA
10.00-10.20 Coffee

Session V.

10.20-10.50 Indolent group
10.50-11.20 MCL group
11.20-11.50 CNS group
11.50-12.15 Pathology group
12.15 Lunch and farewell
Update on working group activities

Indolent group

A manuscript reporting the data from the previous ML16865 trial (rituximab +/- interferon) has been submitted to Annals of Oncology May 2014. Results from the translational studies are anticipated later this year.

The SAKK/NLG randomized phase II study treating follicular lymphoma with rituximab with or without lenalidomid has been closed after accrual of the planned 152 patients. Analysis will be performed during the summer and we hope to present preliminary data in the plenary meeting. Both parties are interested in prolongation of the collaborative work and a new study is planned.

A protocol for long-term follow-up of the previous two studies (M39035 including 127 patients and ML16865 including 313 patients) has been prepared, we await the necessary approvals.

Large cell group

CRY-04 trial and two correlative studies from CRY-04 biological material showing survival association of s-VEGF levels and COMMD1 copy number alterations and expression in DLBCL have been published (Holte et al., 2013, Riihijärvi et al., 2011, Taskinen et al., 2014). In addition, two other manuscripts describing survival association of tumor associated macrophages, and MYC, BCL-2 and TP53 gene and protein expression alterations, respectively, have been submitted for publication. Several other correlative studies on the basis of CRY-04 biological material are ongoing.

The final analysis of the early PET study has been completed, and the manuscript submitted for publication.

CHIC study has included 112 patients by March 31, 2014. Recruitment will continue until the end of 2014. Results from the interim analyses in Nov 2013 showed satisfactory response rates and reasonable toxicity, and were presented orally at ASH 2013.

On the basis of the CRY and CHIC trial experiences, criteria for a biologically high risk DLBCL population have been defined, and a new biomarker-driven and risk-adapted trial proposal for DLBCL patients is in preparation. The proposal will be presented at the plenary meeting.

The ORCHARRD study for relapsed and refractory DLBCL patients was closed for recruitment on Q3 2013.
**CNS-lymphoma group**

We have submitted our manuscript regarding the PCNSL trial for publication. We have decided to join an upcoming IELSG trial for younger patients and an upcoming EPCG trial for elderly PCNSL patients. Neither of these is activated as yet. The ongoing IELSG32 study has almost reached the number of patients required. Nine patients from two centers in Denmark are included in this trial. We are looking forward to welcome two new members of our group – one from Norway and one from Sweden replacing Unn-Merete Fagerli, Trondheim and Martin Erlanson, Umeå. Their tremendous effort for our group for many years is highly appreciated.

**MCL group**

Younger patients: MCL5 Trial is permanently stopped due to failure to respond in 3 of the first 5 patients enrolled (Laurell et al, Leukemia and Lymphoma). MCL3 trial now published (Kolstad et al 2014): No benefit was found of of zevalin to partial responders. PET-response important in partial responders. The Nordic MCL group will join the upcoming European Net TRIANGLE three-arm trial, testing intensive therapy + ibrutinib in younger untreated patients.

Elderly patients: MCL4 1st-line trial “Lena-BeRit” trial completed 2013 with 50 patients. Presented at ASH 2013, manuscript in preparation.

A 1st-line phase-II trial of ABT199 + GA101 is presently being discussed.

A second line phase-II trial “Philemon” will open in 2014 also with a chemotherapy-free approach: ibrutinib, rituximab and lenalidomide, followed by ibrutinib maintenance.

Two important biobank projects are being published: Nordström et al 2014, Husby et al 2014.

**T cell group**

As scheduled, the ACT trials (ACT-1 and ACT-2) ended their recruitment in Q3 2013. The ACT-1 included the last patient on December 12, 2013. A total of 257 pts was included in the ACT trials. The final analysis of the ACT trials will be performed in Q1-Q2 2015. Collection of biological material for correlative studies has begun.

A manuscript with late follow-up (median 9.5 yrs) data from the NLG-T-01 study is in preparation in 2014. The NLG-T-01 specific tissue micro-array is close to completion and correlative studies will soon be initiated.

A new randomized phase II trial for relapsed/refractory CD30+ PTCL is under preparation. A synopsis has been submitted to Takeda/SGN for further negotiations. An update on the progress of this trial proposal will be given at the NLG plenary meeting 2014.
A new phase I/phase II trial for relapsed/refractory PTCL is also under preparation. A possible joint accrual of relapsed/refractory aggressive lymphomas, i.e. of both T- and B-cell phenotype, is currently under consideration. A synopsis of the trial proposal will be submitted to CTI Life Sciences in May 2014 for further negotiations. An update on the progress of this trial proposal will be given at the NLG plenary meeting.

**Hodgkin group**

New protocol for elderly patients with HL under preparation, including brentuximab vedotin and chemotherapy. The study will explore the substitution of vincristin by brentuximab vedotin in CHOP, a regimen commonly used for elderly HL patients in the Nordic countries. Patients not fit for chemotherapy will be offered brentuximab alone. The study will be a collaboration with the German Hodgkin Study Group. The protocol is approved by the manufacturer of brentuximab vedotin and the application process both in Germany and the Nordic countries have started. An update, and hopefully news that the study has opened, will be given at the meeting.

Over the last years, the NLG has participated in the RATHL trial exploring the usefulness of centrally reviewed interim PET in treatment of advanced HL. The study has included successfully until January 2013 and updates will be presented.