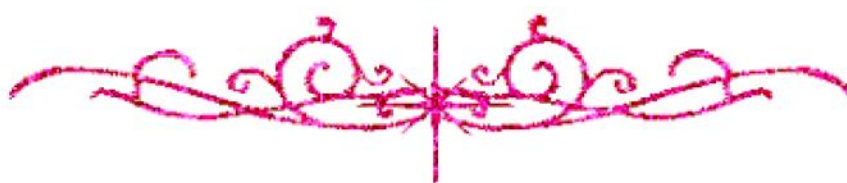


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شبكة المعلومات الجامعية

# بسم الله الرحمن الرحيم



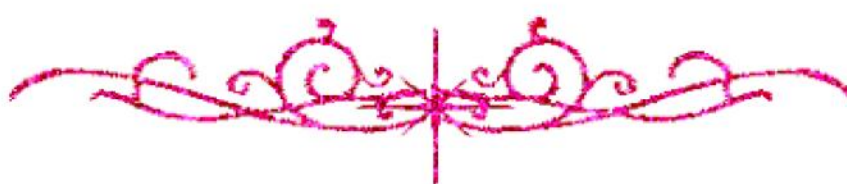
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شبكة المعلومات الجامعية



# شبكة المعلومات الجامعية التوثيق الالكتروني والميكرو فيلم





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# جامعة عين شمس

التوثيق الإلكتروني والميكروفيلم

## قسم

نقسم بالله العظيم أن المادة التي تم توثيقها وتسجيلها  
علي هذه الأقراص المدمجة قد أعدت دون أية تغيرات



## يجب أن

تحفظ هذه الأقراص المدمجة بعيدا عن الغبار



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# بعض الوثائق الأصلية تالفة





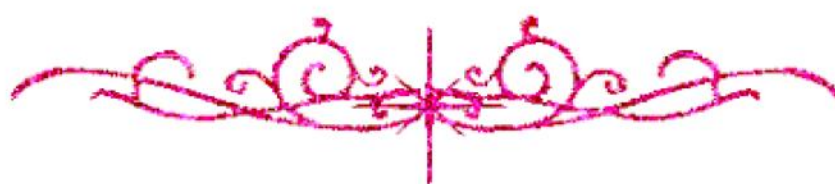
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شبكة المعلومات الجامعية



**بالرسالة صفحات  
لم ترد بالأصل**



B16634

# EVALUATION OF MULTIAGENT CHEMOTHERAPY AND RADIOOTHERAPY IN ADVANCED STAGES HODGKIN'S DISEASE

THESIS

*Submitted for partial fulfillment of M.D. degree in*

**RADIATION ONCOLOGY**

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"قالوا سبحانك لا علم لنا الا ما  
علمتنا انك انت العليم الحكيم."

صدق الله العظيم

سورة البقرة- آية ٣٢

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# ABBREVIATIONS

|            |  |               |  |
|------------|--|---------------|--|
| ABMT       | Autologous bone marrow transplantation | LDH           | Lactate dehydrogenase enzyme                     |
| AML        | Acute myeloid leukemia                 | L/H cell      | Lymphocytic / histiocytic cell                   |
| $\beta_2m$ | Beta 2 macroglobulin                   | LP            | Lymphocyte predominance                          |
| BMT        | Bone marrow transplantation            | MC            | Mixed cellularity                                |
| CD         | Cluster of differentiation             | MRI           | Magnetic resonance imaging                       |
| cGy        | Centigray                              | MR            | Minimal response                                 |
| CMT        | Combined modality treatment            | MV            | Mega volt  |
| CNS        | Central nervous system                 | NHL           | Non Hodgkin lymphoma                             |
| CR         | Complete response                      | NK            | Natural killer cells                             |
| CS         | Clinical staging                       | NLPHD         | Nodular Lymphocyte predominant Hodgkin's disease |
| CT         | Chemotherapy                           | NS            | Nodular sclerosis                                |
| CT scan    | Computed tomography scan               | OS            | Overall survival                                 |
| CXR        | Chest x-ray                            | PET           | Positron emission tomography                     |
| ESR        | Erythrocyte sedimentation rate         | PO            | Orally   |
| EM         | Extended mantle                        | PR            | Partial response                                 |
| FDG        | Fluorine-18-fluorodeoxyglucose         | PS            | Pathologic staging                               |
| FFS        | Failure free survival                  | RIT           | Radiolabeled immunoglobulin therapy              |
| Ga-67      | Gallium-67                             | RS cells      | Reed Sternberg cells                             |
| GI         | Gastrointestinal                       | RT            | Radiation therapy                                |
| Gy         | Gray                                   | SSD           | Source surface distance                          |
| HD         | Hodgkin's disease                      | SSN           | Suprasternal notch                               |
| HDC        | High dose chemotherapy                 | STNI          | Subtotal nodal irradiation                       |
| HIV        | Human immunodeficiency virus           | Tc-99         | Technetium-99                                    |
| H-RS       | Hodgkin's/Reed Sternberg               | TGF- $\beta$  | Transforming growth factor beta                  |
| IL         | Interlukin                             | TNI           | Total nodal irradiation                          |
| INF        | Interferon                             | TNF- $\alpha$ | Tumor necrosis factor alpha                      |
| IV         | Intravenous                            | WBCs          | White blood cells                                |
| LAG        | Bipedal lymphangiography               | Y-90          | Yttrium-90                                       |
| LD         | Lymphocyte depletion                   |               |  |

INTRODUCTION  
AND  
AIM OF THE WORK

## INTRODUCTION AND AIM OF THE WORK

Hodgkin's disease (HD) accounts for about 1% of new cancer cases annually in USA. In Egypt, the relative frequency of HD is 3.4% of all cancer patients with an annual incidence of 75 cases per year of mixed cellularity subtype commonly (Sherif & Ibrahim, 1987). At the year 2001, according to hospital based registry in the Egyptian National Cancer Institute, the relative frequency of HD was 2.1%. The etiology of HD has not been determined and the epidemiological studies suggest that it is a heterogeneous condition comprising more than one disease entity (Oudejans et al, 1997; Armstrong et al, 1998 and Dolcetti & Boiocchi, 1998).

The goal of most of the studies has become to avoid unnecessary invasive techniques. With better knowledge of the late effects and causes of death, there is now a consensus that management should be modulated according to the individual characteristics of the patient. The aim of further studies will be to progress in the identification of the various subsets of Hodgkin's disease (HD) and to introduce new therapeutic modalities as effective but less toxic than the present ones. This approach requires for each subset of patients a rigorous assessment of the long-term cost and benefit of the various therapeutic modalities used for treatment of HD (Tubiana, 1996).

Most patients who present with HD today can be cured of their disease. Current treatments strive to maintain a high level of efficacy while reducing the chance of long-term side effects that limit the quality and length of survival (Yuen & Horning, 1996).



The aim of our study is to evaluate the therapeutic effect of brief chemotherapy, Stanford-V, and adjuvant radiotherapy for bulky or advanced stage Hodgkin's disease.