

Hodgkin Lymphoma: Immunotherapy



What is immunotherapy?

Immunotherapy medicines help your immune system attack and kill cancer cells. These medicines are not used for everyone with Hodgkin lymphoma. But they may be used in certain cases.

Types of immunotherapy medicines

These medicines are used to treat Hodgkin lymphoma:

- Monoclonal antibodies. These are manmade (synthetic) forms of immune system proteins. They're made to bind or attach to specific targets on cancer cells.
 - Brentuximab vedotin. This is a monoclonal antibody that's combined with a chemotherapy (chemo) medicine (also called an antibody drug conjugate). The antibody attaches to a protein (called CD30) found on some lymphoma cells. This helps get the chemo right to the cancer cells. This medicine may help treat Hodgkin lymphoma that has come back after other treatments. It's also used along with chemo as the first treatment for stage III or IV classic Hodgkin lymphoma. It might be used alone after stem cell transplant for people at high risk of the lymphoma coming back.
 - Rituximab. This monoclonal antibody medicine attaches to a target called CD20, which is found on some lymphoma cells. It might be used to treat nodular lymphocyte-predominant Hodgkin disease (NLPHL). It may be used alone, but most often, it's used along with other treatments, like chemo or radiation therapy.
- Immune checkpoint inhibitors. These medicines help keep the body's immune system in check. They boost the immune system's response to cancer cells.
 - Nivolumab and pembrolizumab. These medicines target PD-1, a protein on certain immune cells (T cells) that keep them from attacking other cells. Blocking this protein helps the immune system kill cancer cells. These medicines might be used if classic Hodgkin lymphoma keeps growing during treatment or comes back after treatment.

How immunotherapy is given

These medicines are given right into your blood through an IV (intravenous) line into your vein. This is done once every few weeks. The treatment may be done in places such as:

- The outpatient clinic of a hospital
- At your healthcare provider's office
- A chemotherapy or infusion center

Possible side effects of immunotherapy

This treatment can cause an infusion reaction. It's like an allergic reaction. It often happens while the medicine is being given. Or it may occur just after. Symptoms are usually mild and may include:

- Chills
- Fever
- Nausea
- Flushing of your face
- Rash
- Headache

Rarely, more serious side effects may happen while the medicine is being given. These include:

- Low blood pressure
- Chest tightness
- Wheezing and trouble breathing

You may be given medicines before your infusion to help lower the risk of these problems. Tell your healthcare provider right away if you have any of these symptoms during or soon after your infusion.

Other side effects depend on which medicine is given and other factors. It's very important to tell your healthcare providers about any changes you notice while you're getting treated with monoclonal antibody therapy.

Brentuximab vedotin can cause side effects such as:

- Nerve damage (neuropathy)
- Feeling very tired
- Low blood cell counts
- Nausea and vomiting
- Fever
- Infections
- Diarrhea

Rituximab may cause a severe infusion-related reaction during the first infusion. But it's not common for the infusion reaction to occur with the next infusions of rituximab. This medicine can raise your risk for infection in the months after treatment. If you have been infected with the hepatitis B virus in the past, the virus may become active again. Your healthcare provider will likely test your blood for hepatitis B before you start this medicine.

Nivolumab and pembrolizumab can cause these side effects:

- Feeling very tired
- Cough
- Skin rash
- Joint pain

- Loss of appetite
- Bowel problems (constipation or diarrhea)

Because these medicines kill cancer cells by taking the brakes off the immune system, sometimes the immune system starts attacking other parts of the body. This can lead to serious problems with the lungs, kidneys, liver, and other organs.

Working with your healthcare provider

It's important to know which medicines you're taking. Write down the names of your medicines. Ask your healthcare team how they work and what side effects they might cause.

Talk with your healthcare providers about what symptoms to watch for and when to call them. Make sure you know what number to call with questions. Is there a different number for evenings, weekends, and holidays?

It may be helpful to keep a diary of your side effects. Write down physical, thinking, and emotional changes. A written list will make it easier for you to remember your questions when you go to your appointments. It will also make it easier for you to work with your healthcare team to make a plan to manage your side effects.

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