Hodgkin's Lymphoma Interventions

Hodgkin's lymphoma is a malignant condition caused by the proliferation of Reed-Sternberg cells in lymph node tissue (refer to the Picmonic on "Hodgkin's Lymphoma Assessment"). A key diagnostic tool is biopsy to determine the presence of Reed-Sternberg cells. Staging of the disease is done using the Ann Arbor Staging Criteria, CT scan, or PET scan. Interventions for include treating the symptoms associated with radiation therapy and chemotherapy. Since a significant number of patients with Hodgkin's Lymphoma develop secondary cancers, considerations include secondary cancer screening for early detection and intervention.



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Diagnosis

Biopsy

Biopsy-needle

Excisional lymph node biopsy is the main diagnostic tool for determining Hodgkin's lymphoma. The presence of Reed-Sternberg cells in the lymph node specimen indicates disease.

Staging

Setting-up Stage

The staging of Hodgkin's lymphoma is based on Ann Arbor Staging Criteria, the presence of B symptoms, and results of CT and PET scans. The classification of A or B indicates whether the symptoms were present after diagnosing the disease. A Roman numeral between I to IV reflects the location and extent of the disease. Staging the disease determines the patient's treatment plan.

Interventions

Radiation

Radiation-radio

The tumors associated with Hodgkin's lymphoma have high radiosensitivity and respond well to external radiation therapy of involved lymph node regions. Radiation may be supplemented with chemotherapy depending on the site of disease and presence of resistant disease after chemotherapy treatment.

Chemotherapy

Chemo-head-wrap

Patients with severe progression of Hodgkin's lymphoma may be treated with a combination of radiation and chemotherapy. The standard chemotherapy plan for patients with early stages of Hodgkin's lymphoma is the ABVD regimen. Chemotherapeutic agents used include adriamycin, bleomycin, vinblastine, and dacarbazine. The BEACOPP regimen is used for patients in advanced stages. Medications include bleomycin, etoposide, doxorubicin (Adriamycin), cyclophosphamide, vincristine (Oncovin), procarbazine, and prednisone. Combination chemotherapy may have an additive antitumor effect with minimal side effects. Diagnostic tests such as CT and PET scans are used to determine the effectiveness of therapy.

Treat Side Effects of Therapy

Side Fx Therapeutically-massaging

Therapeutic treatments such as radiation and chemotherapy will cause unpleasant side effects. Nausea, vomiting, and pancytopenia are expected side effects of therapy. Administering anti-emetic medications prior to chemotherapy may help reduce nausea. Monitoring the patient's red blood cells, white blood cells, and platelets is critical for early intervention for pancytopenia.

Considerations

Secondary Cancer Screening

(2) Tutu Tumor-guy and Screen-door

Patients with Hodgkin's lymphoma may develop secondary cancers, such as acute myelogenous leukemia (AML) (refer to the Picmonic on "Leukemia Assessment"). Causes include undergoing transplant surgery and taking immunosuppressive medications. Secondary cancers are resistant to

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chemotherapeutic drugs, such as alkylating agents.

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