

Adult T-cell leukemia/lymphoma in French Guiana: Real-life data from 2009 to 2019

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Background:

Adult T-cell leukemia / lymphoma (ATL) is one of the most aggressive cancers in the world. ATL occurs in 5% of the 10 million people living with HTLV-1 worldwide. French Guiana is a French overseas territory in the Amazon region and one of the highest endemic areas of HTLV-1. The objectives were to describe the demographic and clinical characteristics of the population.

Methods:

We collected data from all patients diagnosed between 2009 and 2019. Patients were distributed according to Shimoyama's classification. Continuous variables were compared using a Mann Whitney test. Survival curves were evaluated by the Kaplan-Meier method. The assessment of prognostic factors was based on a Cox model.

Results:

Over the study period, 41 patients with a median age of 54 years at diagnosis were identified, among whom 56% were women. Sixteen (39%) patients were Maroons, a cultural group descendant of the African slaves of former Dutch Guiana. Among the study population, 23 (56%) had an acute-type, 14 (34%) a lymphoma-type, one had a chronic form and one had a primary cutaneous tumour. Hypercalcemia was associated with the acute-type (69.5% vs. 42.8% in the lymphoma group; $p = 0.015$). The 4-year survival was 11.4% for the entire population with 0% and 11% for the lymphoma and acute groups, respectively. The median survival time was 104 days for the acute group and 120 days for the lymphoma group. The cause of death were infections (29%) and disease progression (25%). Male sex, the presence of "B" signs and hypercalcemia were rather associated with a poor prognosis. Conversely, deworming appears to be a potential good prognostic factor.

Conclusion:

This study provided real-life data from ATL patients in French Guiana, a high-income territory in a middle-income region. Patients, mostly Maroons, presented with a younger age and the prognosis was poorer than expected, compared to Japanese patients.