



Tipo	Periódico
Título	Immune-Checkpoint Inhibitors in B-Cell Lymphoma
Autores	Armengol M, Santos JC, Fernández-Serrano M, Profitós-Pelejà N, Ribeiro ML, Roué G.
Autor (es) USF	Ribeiro, Marcelo Lima
Autores Internacionais	Armengol M, Santos JC, Fernández-Serrano M, Profitós-Pelejà N, Roué G.
Programa/Curso (s)	Programa de Pós-Graduação Stricto Sensu em Ciências da Saúde
DOI	10.3390/cancers13020214
Assunto (palavras chaves)	immune checkpoint; lymphoid neoplasms; programmed death ; cytotoxic T-lymphocyte antigen ; monoclonal antibodies; combination therapies
Idioma	Inglês
Fonte	Título do periódico:Cancers ISSN: 2072-6694 Volume/Número/Paginação/Ano: 13(2), 214/2021
Data da publicação	8 January 2021
Formato da produção	Digital
Resumo	<p>For years, immunotherapy has been considered a viable and attractive treatment option for patients with cancer. Among the immunotherapy arsenal, the targeting of intratumoral immune cells by immune-checkpoint inhibitory agents has recently revolutionised the treatment of several subtypes of tumours. These approaches, aimed at restoring an effective antitumour immunity, rapidly reached the market thanks to the simultaneous identification of inhibitory signals that dampen an effective antitumor response in a large variety of neoplastic cells and the clinical development of monoclonal antibodies targeting checkpoint receptors. Leading therapies in solid tumours are mainly focused on the cytotoxic T-lymphocyte-associated antigen 4 (CTLA-4) and programmed death 1 (PD-1) pathways. These approaches have found a promising testing ground in both Hodgkin lymphoma and non-Hodgkin lymphoma, mainly because, in these diseases, the malignant cells interact with the immune system and commonly provide signals that regulate immune function. Although several trials have already demonstrated evidence of therapeutic activity with some checkpoint inhibitors in lymphoma, many of the immunologic lessons learned from solid tumours may not directly translate to lymphoid malignancies. In this sense, the mechanisms of effective antitumor responses are different between the different lymphoma subtypes, while the reasons for this substantial difference remain partially unknown. This review will discuss the current advances of immune-checkpoint blockade therapies in B-cell lymphoma and build a projection of how the field may evolve in the near future. In particular, we will analyse the current strategies being evaluated both preclinically and clinically, with the aim of fostering the use of immune-checkpoint inhibitors in lymphoma, including combination approaches with chemotherapeutics, biological agents and/or different immunologic therapies.</p>
Fomento	CNPq