

## Literatura ACTA MEDICINAE 15/2019 Kazuistiky

- 2 **Nemalobuněčný karcinom plic s přestavbou genu ALK a ROS1, léčený lorlatinibem**  
MUDr. Leona Koubková Pneumologická klinika, 2. LF UK a FN v Motole, Praha
- 2 **Výborná odpověď na léčbu pembrolizumabem u nemocné se 100% expresí PD-L1**  
MUDr. Daniel Krejčí | MUDr. Jana Krejčí | doc. MUDr. Norbert Pauk, Ph.D.  
Klinika pneumologie 3. lékařské fakulty UK a Nemocnice Na Bulovce, Praha
- 2 **Výrazná regrese nemalobuněčného plicního tumoru po třech cyklech pembrolizumabu**  
MUDr. Bc. Petr Zůna | MUDr. Daniel Krejčí | doc. MUDr. Norbert Pauk, Ph.D.  
Klinika pneumologie 3. LF UK a Nemocnice Na Bulovce, Praha
- 2 **Alectinib v první linii léčby metastatického NSCLC s pozitivní přestavbou genu ALK**  
MUDr. Leona Koubková Pneumologická klinika, 2. LF UK a FN v Motole, Praha
- 2 **Kazuistika pacienta s metastazujícím karcinomem rekta léčeného bevacizumabem**  
MUDr. Stanislav Batko Onkologická klinika FN v Motole, Praha  
Prim. MUDr. Jiří Pudil Chirurgická klinika 2. LF UK a ÚVN, Praha
- 3 **Léčba anti-VEGFR v kombinaci s chemoterapií v první i druhé linii u metastatického kolorektálního karcinomu**  
MUDr. Lenka Ostřížková Interní hematologická a onkologická klinika, FN Brno
- 3 **Účinná terapie metastatického HER-2 dependentního karcinomu prsu u předléčené pacientky**  
MUDr. Martin Matějů, Ph.D. Onkologická klinika 1. LF UK a VFN, Praha
- 3 **Axitinib ve druhé linii léčby u pacienta s oboustranným metastatickým nádorem ledvin**  
MUDr. Jaroslav Hájek Klinika onkologická, Fakultní nemocnice Ostrava
- 3 **Dlouhodobý efekt léčby enzalutamidem u pacienta s kastačně rezistentním karcinomem prostaty v postchemoindikaci**  
MUDr. Darja Šustrová Onkologická klinika FN v Motole a 2. LF UK, Praha
- 3 **Efektivní léčba kombinací imunochemoterapie a venetoklaxu u relabující/refrakterní chronické lymfocytární leukemie po selhání monoterapie venetoklaxem**  
MUDr. Peter Turcsányi, Ph.D. Hemato-onkologická klinika FNOL a LF UP, Olomouc
- 3 **Ibrutinib v léčbě pacientů s chemorefrakterním lymfomem z plášťových buněk**  
doc. MUDr. Pavel Kleiner, Ph.D. I. interní klinika hematologie, VFN a 1. LF UK, Praha
- 4 **Úspěšná léčba ibrutinibem u staršího pacienta s opakováně relabujícím lymfomem z buněk pláště**  
MUDr. Renata Machová Hematoonkologická klinika FNOL a LF UP, Olomouc
- 4 **Ibrutinib a terapie CNS progrese u pacienta s chemorezistentním lymfomem z plášťových buněk**  
MUDr. David Šálek Interní hematologická a onkologická klinika, Fakultní nemocnice Brno
- 4 **Mnohočetná selhání anti-TNF terapie u pacienta s ankylozující spondylitidou**  
doc. MUDr. Petr Bradna, CSc. II. interní gastroenterologická klinika FN a LF UK v Hradci Králové
- 5 **Léčba secukinumabem u pacienta se souběhem těžké formy psoriázy a roztroušené sklerózy**  
MUDr. Jan Hugo Dermatovenerologická klinika 3. LF UK a FNKV, Praha
- 5 **Zjednodušení a zefektivnění léčby hypertenze**  
MUDr. Jan Vachek Klinika nefrologie 1. LF UK a VFN, Praha, Interní oddělení a hemodialyzační středisko, Klatovská nemocnice, a. s.  
MUDr. Adéla Maříková Interní oddělení a hemodialyzační středisko, Klatovská nemocnice, a. s.
- 5 **8% kapsaicin (Qutenza) v léčbě periferní neuropatické bolesti (postherpetické neuralgie)**  
doc. MUDr. Jitka Fricová, Ph.D. Centrum pro léčbu bolesti, Klinika anesteziologie a resuscitace a intenzivní medicíny, 1. LF UK a VFN, Praha
- 5 **Chronická obstrukční plicní nemoc – léčba šítá na míru**  
doc. MUDr. Václava Bártů, Ph.D. Pneumologické oddělení, Medicon, a. s., Praha
- 5 **Cornea verticillata a význam jejího odhalení u Fabryho choroby**  
MUDr. Zora Dubská, CSc. | MUDr. Klára Sedláčková, Ph.D. | MUDr. Jana Becková, CSc. | Ing. Martin Meliška  
Oční klinika, 1. LF UK a VFN, Praha MUDr. Gabriela Dostálková, Ph.D. | MUDr. Lenka Roblová | prof. MUDr. Aleš Linhart, DrSc.  
II. Interní klinika – klinika kardiologie a angiologie, 1. LF UK a VFN, Praha MUDr. Petra Reková Neurologická klinika, 1. LF UK a VFN, Praha MUDr. Vladimíra Fialová oční lékařka, Praha

# Nemalobuněčný karcinom plic s přestavbou genu ALK a ROS1, léčený lorlatinibem

MUDr. Leona Koubková Pneumologická klinika, 2. LF UK a FN v Motole, Praha

- 1 Gainor, J. F. – Dardaei, L. – Yoda, S., et al.: Molecular mechanisms of resistance to first- and second-generation ALK inhibitors in ALK-rearranged lung cancer. *Cancer Discov*, 2016, 6, s. 1118–1133.
- 2 Choi, Y. L. – Soda, M. – Yamashita, Y., et al.; ALK Lung Cancer Study Group: EML4-ALK mutations in lung cancer that confer resistance to ALK inhibitors. *N Engl J Med*, 2010, 363, s. 1734–1739.
- 3 Sasaki, T. – Koivunen, J. – Ogino, A., et al.: A novel ALK secondary mutation and EGFR signaling cause resistance to ALK kinase inhibitors. *Cancer Res*, 2011, 71, s. 6051–6060.
- 4 Solomon, B. J. – Besse, B. – Bauer, T. M., et al.: Lorlatinib in patients with ALK-positive non-small-cell lung cancer: results from a global phase 2 study. *Lancet Oncol*, 2018, 19, s. 1654–1667.
- 5 Besse, B. – Shaw, A. T. – Solomon, B. J., et al.: Preliminary efficacy and safety of lorlatinib in patients with ROS1-positive non-small cell lung cancer (NSCLC). *Ann Oncol*, 2017, 28, suppl. 5, s. v460–v496, 10.1093/annonc/mdx380.
- 6 SPC Lorviqua.
- 7 Gainor, J. F., et al.: Patterns of metastatic spread and mechanism of resistance to crizotinib in ROS1-positive non-small-cell lung cancer. *JCO Precis Oncol*, 2017, s. 1–13.
- 8 Shaw, A. T. – Ou, S.-H. I. – Felip, E., et al.: Efficacy and safety of lorlatinib in patients (pts) with ALK+ non-small cell lung cancer (NSCLC) with one or more prior ALK tyrosine kinase inhibitor (TKI): A phase I/II study. *J Clin Oncol*, 2017, 35, suppl., s. 9006.
- 9 Solomon, B. J. – Shaw, A. – Ou, S.-H. I., et al.: Phase 2 study of lorlatinib in patients with advanced ALK+/ROS+ non-small-cell lung cancer. *J Thorac Oncol*, 2017, 12, suppl. 2, 11.abstract OA05.06.

## Výborná odpověď na léčbu pembrolizumabem u nemocné se 100% expresí PD-L1

MUDr. Daniel Krejčí | MUDr. Jana Krejčí | doc. MUDr. Norbert Pauk, Ph.D.  
Klinika pneumologie 3. lékařské fakulty UK a Nemocnice Na Bulovce, Praha

- 1 SPC Keytruda.
- 2 Leighl, N. B., et al.: Pembrolizumab in patients with advanced non-small-cell lung cancer (KEYNOTE-001): 3-year results from an open-label, phase 1 study. *Lancet Resp Med*, 2019, 7, s. 347–357.
- 3 Herbst, R. S. – Baas, P. – Kim, D. W., et al.: Pembrolizumab versus docetaxel for previously treated, PD-L1-positive, advanced non-small-cell lung cancer (KEYNOTE-010): a randomised controlled trial. *Lancet*, 2016, 387, s. 1540–1550.
- 4 Reck, M. – Rodriguez-Abreu, D. – Robinson, A. G., et al.: Pembrolizumab versus chemotherapy for PD-L1-positive non-small-cell lung cancer. *N Engl J Med*, 2016, 375, s. 1823–1833.
- 5 Reck, M. – Rodriguez-Abreu, D. – Robinson, A. G., et al.: Updated analysis of KEYNOTE-024: pembrolizumab versus platinum-based chemotherapy for advanced non-small-cell lung cancer with PD-L1 tumor proportion score of 50% or greater. *J Clin Oncol*, 2019, 37, s. 537–546.

## Výrazná regrese nemalobuněčného plicního tumoru po třech cyklech pembrolizumabu

MUDr. Bc. Petr Zůna | MUDr. Daniel Krejčí | doc. MUDr. Norbert Pauk, Ph.D.  
Klinika pneumologie 3. LF UK a Nemocnice Na Bulovce, Praha

- 1 Simeone, J. C. – Nordstrom, B. L. – Patel, K. – Klein, A. B.: Treatment patterns and overall survival in metastatic non-small-cell lung cancer in a real-world, US setting. *Future Oncol*, 2019, 15, s. 3491–3502.
- 2 Reck, M. – Rodriguez-Abreu, D. – Robinson, A. G., et al.: Pembrolizumab versus chemotherapy for PD-L1-positive non-small-cell lung cancer. *N Engl J Med*, 2016, 375, s. 1540–1550.
- 3 SPC Keytruda
- 4 Planchard, D. – Popat, S. – Kerr, K., et al.: Metastatic non-small cell lung cancer: ESMO Clinical Practice Guidelines for diagnosis, treatment and follow-up. *Ann Oncol*, 2019, 30, s. 863–870.

## Alectinib v první linii léčby metastatického NSCLC s pozitivní přestavbou genu ALK

MUDr. Leona Koubková Pneumologická klinika, 2. LF UK a FN v Motole, Praha

- 1 Novello, S. – Mazieres, J. – Oh, I.-J., et al.: Alectinib versus chemotherapy in crizotinib-pretreated anaplastic lymphoma kinase (ALK)-positive non-small-cell lung cancer: results from the phase III ALUR study. *Ann Oncol*, 2018, 29, s. 1409–1416.
- 2 Peters, S. – Ross Camidge, D. – Shaw, A. T., et al.: Alectinib versus crizotinib in untreated ALK-positive non-small-cell lung cancer. *N Engl J Med*, 2017, 377, s. 829–838.
- 3 SPC Alectina.
- 4 Soda, M. – Choi, Y. L. – Enomoto, M., et al.: Identification of the transforming EML4-ALK fusion gene in non-small-cell lung cancer. *Nature*, 2007, 448, s. 561–566.
- 5 Rikova, K. – Guo, A. – Zeng, Q., et al.: Global survey of phosphotyrosine signaling identifies oncogenic kinases in lung cancer. *Cell*, 2007, 131, s. 1190–1203.
- 6 Hallberg, B. – Palmer, R. H.: Mechanistic insight into ALK receptor tyrosine kinase in human cancer biology. *Nat Rev Cancer*, 2013, 13, s. 685–700.
- 7 Roskoski, R. Jr.: Anaplastic lymphoma kinase (ALK): structure, oncogenic activation, and pharmacological inhibition. *Pharmacol Res*, 2013, 68, s. 68–94.
- 8 Bai, R. Y. – Dieter, P. – Peschel, C., et al.: Nucleophosmin-anaplastic lymphoma kinase of large-cell anaplastic lymphoma is a constitutively active tyrosine kinase that utilizes phospholipase C-gamma to mediate its mitogenicity. *Mol Cell Biol*, 1998, 18, s. 6951–6961.
- 9 Fujimoto, J. – Shiota, M. – Iwahara, T., et al.: Characterization of the transforming activity of p80, a hyperphosphorylated protein in a Ki-1 lymphoma cell line with chromosomal translocation (t;2;5). *PNAS*, 1996, 93, s. 4181–4186.
- 10 Bai, R.-Y. – Ouyang, T. – Miethling, C., et al.: Nucleophosmin-anaplastic lymphoma kinase associated with anaplastic large-cell lymphoma activates the phosphatidylinositol 3-kinase/Akt antiapoptotic signaling pathway. *Blood*, 2000, 96, s. 4319–4327.
- 11 Zamo, A. – Chiarle, R. – Piva, R., et al.: Anaplastic lymphoma kinase (ALK) activates Stat3 and protects hematopoietic cells from cell death. *Oncogene*, 2002, 21, s. 1038–1047.
- 12 Camidge, D. R. – Ou, S.-H. I. – Sjapiro, G., et al.: Efficacy and safety of crizotinib in patients with advanced c-MET-amplified non-small cell lung cancer (NSCLC). *J Clin Oncol*, 2014, 32, suppl., s. 8001.
- 13 Peters, S. – Camidge, D. R. – Shaw, A. T., et al.: Alectinib versus crizotinib in untreated ALK-positive non-small-cell lung cancer. *N Engl J Med*, 2017, 377, s. 829–838.

## Kazuistika pacienta s metastazujícím karcinomem rekta léčeného bevacizumabem

MUDr. Stanislav Batko Onkologická klinika FN v Motole, Praha  
Prim. MUDr. Jiří Pudil Chirurgická klinika 2. LF UK a ÚVN, Praha

- 1 Ferlay, J. – Soerjomataram, I. – Dikshit, R., et al.: Cancer incidence and mortality worldwide: Sources, methods and major patterns in GLOBOCAN 2012. *Int J Cancer*, 2015, 136, s. E359–E386.
- 2 Arnold, M. – Sierra, M. S. – Laversanne, M., et al.: Global patterns and trends in colorectal cancer incidence and mortality. *Gut*, 2017, 66, s. 683–691.
- 3 Loupakis, F. – Cremolini, Ch. – Masi, G., et al.: Initial therapy with FOLFOXIRI and bevacizumab for metastatic colorectal cancer. *N Engl J Med*, 2014, 371, s. 1609–1618.
- 4 Cremolini, Ch. – Antoniotti, C. – Lonardi, S., et al.: Updated results of TRIBE2, a phase III, randomized strategy study by GONO in the first- and second-line treatment of unresectable mCRC. *J Clin Oncol*, 2019, 37, suppl. 3508–3508.

## Léčba anti-VEGFR v kombinaci s chemoterapií v první i druhé linii u metastatického kolorektálního karcinomu

MUDr. Lenka Ostržková Interní hematologická a onkologická klinika, FN Brno

- 1 Van Cutsem, E. – Tabernero, J. – Lakomy, R., et al.: Addition of afiblercept to fluorouracil, leucovorin, and irinotecan improves survival in a phase III randomized trial in patients with metastatic colorectal cancer previously treated with an oxaliplatin-based regimen. *J Clin Oncol*, 2012, 30, s. 3499–3506.
- 2 Bennouna, J. – Sastre, J. – Arnold, D., et al.: Continuation of bevacizumab after first progression in metastatic colorectal cancer (ML18147): a randomised phase 3 trial. *Lancet Oncol*, 2013, 14, s. 29–37.
- 3 Giantonio, B. J. – Catalano, P. J. – Meropol, N. J., et al.: Bevacizumab in combination with oxaliplatin, fluorouracil, and leucovorin (FOLFOX4) for previously treated metastatic colorectal cancer: results from the Eastern Cooperative Oncology Group Study E3200. *J Clin Oncol*, 2007, 25, s. 1539–1544.

## Účinná terapie metastatického HER-2 dependentního karcinomu prsu u předléčené pacientky

MUDr. Martin Matějů, Ph.D. Onkologická klinika 1. LF UK a VFN, Praha

- 1 Wilson, F. R., et al.: Herceptin (trastuzumab) in HER2-positive early breast cancer: a systematic review and cumulative network meta-analysis. *Syst Rev*, 2018, 7, s. 191.
- 2 Slamon, D. J. – Godolphin, W. – Jones, L. A., et al.: Studies of the HER-2/neu proto-oncogene in human breast and ovarian cancer. *Science*, 1989, 244, s. 707–712.
- 3 Pegram, M. D. – Pauletti, G. – Slamon, D. J.: Her-2/neu as a predictive marker of response to breast cancer therapy. *Breast Cancer Res Treat*, 1998, 52, s. 65.
- 4 Modrá kniha ČOS. MOÚ, 2019.
- 5 Büchler, T. – Čejková, J.: Přehled biologické léčby HER2-positivního metastatického karcinomu prsu. *Klin Farmakol Farm*, 2015, 29, s. 8–12.
- 6 Krop, I. E. – Kim, S. B. – Martin, A. G., et al.: Trastuzumab emtansine versus treatment of physician's choice in patients with previously treated HER2-positive metastatic breast cancer (TH3RESA): final overall survival results from a randomised open-label phase 3 trial. *Lancet Oncol*, 2017, 18, s. 743–754.

## Axitinib ve druhé linii léčby u pacienta s oboustranným metastatickým nádorem ledvin

MUDr. Jaroslav Hájek Klinika onkologická, Fakultní nemocnice Ostrava

- 1 Dušek, L. – Mužík, J. – Kubásek, M., et al.: Epidemiologie zhoubných nádorů v České republice (on line), dostupné z: <http://www.svob.cz>.
- 2 Tzogani, K. – Skibeli, V. – Westgaard, I., et al.: The European Medicine Agency approval of axitinib (Inlyta) for the treatment of advanced renal cell carcinoma after failure of prior treatment with sunitinib or cytokine. Summary of the scientific assessment of the committee for medicinal product for human use. *Oncologist*, 2015, 20, s. 196–201.

## Dlouhodobý efekt léčby enzalutamidem u pacienta s kastračně rezistentním karcinomem prostaty v postchemoindikaci

MUDr. Darja Šustrová Onkologická klinika FN v Motole a 2. LF UK, Praha

- 1 Scher, H. I. – Fizazi, K. – Saad, F., et al.: Increased survival with enzalutamide in prostate cancer after chemotherapy. *N Engl J Med*, 2012, 367, s. 1187–1197.
- 2 www.sukl.cz
- 3 Fleming, M. T. – Scher, H. I. – Fizazi, K., et al.: Long-term responders to enzalutamide (ENZA) during the phase III AFFIRM trial: Baseline characteristics and efficacy outcomes. *J Clin Oncol*, 2013, 31, suppl., s. 20.

## Efektivní léčba kombinací imunochemoterapie a venetoklaxu u relabující refrakterní chronické lymfocytární leukemie po selhání monoterapie venetoklaxem

MUDr. Peter Turcsányi, Ph.D. Hemato-onkologická klinika FNOL a LF UP, Olomouc

- 1 Stilgenbauer, S. – Eichhorst, B. – Schetelig, J., et al.: Venetoclax in relapsed or refractory chronic lymphocytic leukaemia with 17p deletion: a multicentre, open-label, phase 2 study. *Lancet Oncol*, 2016, 17, s. 768–778.
- 2 Jones, J. A. – Mato, A. R. – Wierda, W. G., et al.: Venetoclax for chronic lymphocytic leukaemia progressing after ibrutinib: an interim analysis of a multicentre, open-label, phase 2 trial. *Lancet Oncol*, 2018, 19, s. 65–75.
- 3 Roberts, A. W. – Davids, M. S. – Pagel, J. M., et al.: Targeting BCL2 with venetoclax in relapsed chronic lymphocytic leukemia. *N Engl J Med*, 2016, 374, s. 311–322.
- 4 Mato, A. R. – Thompson, M. – Allan, J. N., et al.: Real world outcomes and management strategies for venetoclax-treated chronic lymphocytic leukemia patients in the United States. *Haematologica*, 2018, 103, s. 1511–1517.
- 5 Seymour, J. F. – Kips, T. J. – Eichhorst, B., et al.: Venetoclax–rituximab in relapsed or refractory chronic lymphocytic leukemia. *N Engl J Med*, 2018, 378, s. 1107–1120.

## Ibrutinib v léčbě pacientů s chemorefrakterním lymfomem z plášťových buněk

doc. MUDr. Pavel Kleiner, Ph.D. I. interní klinika hematologie, VFN a 1. LF UK, Praha

- 1 Cheah, C. Y. – Seymour, J. F. – Wang, M. L.: Mantle Cell Lymphoma. *J Clin Oncol*, 2016, 34, s. 1256–1269.
- 2 Kleiner, P.: Advances in Molecular Biology and Targeted Therapy of Mantle Cell Lymphoma. *Int J Mol Sci*, 2019, 20.
- 3 Swerdlow, S. H. – Campo, E. – Pileri, S. A., et al.: The 2016 revision of the World Health Organization classification of lymphoid neoplasms. *Blood*, 2016, 127, s. 2375–2390.
- 4 Hoster, E. – Dreyling, M. – Klapper, W., et al.: A new prognostic index (MIPI) for patients with advanced-stage mantle cell lymphoma. *Blood*, 2008, 111, s. 558–565.
- 5 Hoster, E. – Klapper, W. – Hermine, O., et al.: Confirmation of the mantle-cell lymphoma International Prognostic Index in randomized trials of the European Mantle-Cell Lymphoma Network. *J Clin Oncol*, 2014, 32, s. 1338–1346.
- 6 Hoster, E. – Rosenwald, A. – Berger, F., et al.: Prognostic value of Ki-67 index, cytology, and growth pattern in mantle-cell lymphoma: results from randomized trials of the European Mantle Cell Lymphoma Network. *J Clin Oncol*, 2016, 34, s. 1386–1394.
- 7 Lenz, G. – Dreyling, M. – Hoster, E., et al.: Immunochemotherapy with rituximab and cyclophosphamide, doxorubicin, vincristine, and prednisone significantly improves response and time to treatment failure, but not long-term outcome in patients with previously untreated mantle cell lymphoma: results of a prospective randomized trial of the German Low Grade Lymphoma Study Group (GLSG). *J Clin Oncol*, 2005, 23, s. 1984–1992.
- 8 Visco, C. – Chiappella, A. – Nassi, L., et al.: Rituximab, bendamustine, and low-dose cytarabine as induction therapy in elderly patients with mantle cell lymphoma: a multicentre, phase 2 trial from Fondazione Italiana Linfomi. *Lancet Haematol*, 2017, 4, s. e15–e23.
- 9 Kleiner, P. – Fronkova, E. – Belada, D., et al.: Alternating R-CHOP and R-cytarabine is a safe and effective regimen for transplant-ineligible patients with a newly diagnosed mantle cell lymphoma. *Hematologic Oncol*, 2018, 36, s. 110–115.
- 10 Rummel, M. J. – Niederle, N. – Maschmeyer, G., et al.: Bendamustine plus rituximab versus CHOP plus rituximab as first-line treatment for patients with indolent and mantle-cell lymphomas: an open-label,

- multicentre, randomised, phase 3 non-inferiority trial. *Lancet* (London, England), 2013, 381, s. 1203–1210.
- 11 **Kluin-Nelemans, H. C. – Hoster, E. – Hermine, O., et al.:** Treatment of older patients with mantle-cell lymphoma. *New Eng J Med*, 2012, 367, s. 520–531.
  - 12 **Obr, A. – Prochazka, V. – Papajík, T., et al.:** Maintenance rituximab in newly diagnosed mantle cell lymphoma patients: a real world analysis from the Czech lymphoma study group registry (dagger). *Leukemia & lymphoma*, 2019, 60, s. 748–755.
  - 13 **Geisler, C. H. – Kolstad, A. – Laurell, A., et al.:** Nordic MCL2 trial update: six-year follow-up after intensive immunochemotherapy for untreated mantle cell lymphoma followed by BEAM or BEAC + autologous stem-cell support: still very long survival but late relapses do occur. *Br J Haematol*, 2012, 158, s. 355–362.
  - 14 **Hermine, O. – Hoster, E. – Walewski, J., et al.:** Addition of high-dose cytarabine to immunochemotherapy before autologous stem-cell transplantation in patients aged 65 years or younger with mantle cell lymphoma (MCL Younger): a randomised, open-label, phase 3 trial of the European Mantle Cell Lymphoma Network. *Lancet* (London, England), 2016, 388, s. 565–575.
  - 15 **Le Gouill, S. – Thieblemont, C. – Oberic, L., et al.:** Rituximab after autologous stem-cell transplantation in mantle-cell lymphoma. *New Eng J Med*, 2017, 377, s. 1250–1260.
  - 16 **Klenér, P. – Salek, D. – Pytlík, R., et al.:** Rituximab maintenance significantly prolongs progression-free survival of patients with newly diagnosed mantle cell lymphoma treated with the Nordic MCL2 protocol and autologous stem cell transplantation. *Am J Hematol*, 2019, 94, s. e50–e53.
  - 17 **Kumar, A. – Sha, F. – Toure, A., et al.:** Patterns of survival in patients with recurrent mantle cell lymphoma in the modern era: progressive shortening in response duration and survival after each relapse. *Blood Cancer J*, 2019, 9, s. 507–516.
  - 18 **Wang, M. L. – Rule, S. – Martin, P., et al.:** Targeting BTK with ibrutinib in relapsed or refractory mantle-cell lymphoma. *New Eng J Med*, 2013, 369, s. 507–516.
  - 19 **Trněný, M. – Lamy, T. – Walewski, J., et al.:** Lenalidomide versus investigator's choice in relapsed or refractory mantle cell lymphoma (MCL-002; SPRINT): a phase 2, randomised, multicentre trial. *Lancet Oncol*, 2016, 17, s. 319–331.
  - 20 **Visco, C. – Finotto, S. – Zambello, R., et al.:** Combination of rituximab, bendamustine, and cytarabine for patients with mantle-cell non-Hodgkin lymphoma ineligible for intensive regimens or autologous transplantation. *J Clin Oncol*, 2013, 31, s. 1442–1449.
  - 21 **Dreyling, M. – Jurczak, W. – Jerkeman, M., et al.:** Ibrutinib versus temsirolimus in patients with relapsed or refractory mantle-cell lymphoma: an international, randomised, open-label, phase 3 study. *Lancet* (London, England), 2016, 387, s. 770–778.
  - 22 **Mestre-Escorihuela, C. – Rubio-Moscardo, F. – Richter, J. A., et al.:** Homozygous deletions localize novel tumor suppressor genes in B-cell lymphomas. *Blood*, 2007, 109, s. 271–280.
  - 23 **Cheah, C. Y. – Chihara, D. – Romaguera, J. E., et al.:** Patients with mantle cell lymphoma failing ibrutinib are unlikely to respond to salvage chemotherapy and have poor outcomes. *An Oncol*, 2015, 26, s. 1175–1179.
  - 24 **Martin, P. – Bartlett, N. L. – Blum, K. A., et al.:** A phase 1 trial of ibrutinib plus palbociclib in previously treated mantle cell lymphoma. *Blood*, 2019, 133, s. 1201–1204.
  - 25 **Agarwal, R. – Chan, Y.-C. – Tam, C. S., et al.:** Dynamic molecular monitoring reveals that SWI-SNF mutations mediate resistance to ibrutinib plus venetoclax in mantle cell lymphoma. *Nat Med*, 2019, 25, s. 119–129.

## Úspěšná léčba ibrutinibem u staršího pacienta s opakováně relabujícím lymfomem z buněk pláště

MUDr. Renata Machová Hematoonkologická klinika FNOL a LF UP, Olomouc

- 1 **Dreyling, M.:** Mantle cell lymphoma: biology, clinical presentation, and therapeutic approaches. *Am Soc Clin Oncol Educ Book*, 2014, s. 191–198.
- 2 **Hermine, O., et al.:** Addition of high-dose cytarabine to immunochemotherapy before autologous stem-cell transplantation in patients aged 65 years or younger with mantle-cell lymphoma: a randomised, open-label, phase 3 trial of the European Mantle Cell Lymphoma Network. *Lancet*, 2016, 388, s. 565–575.
- 3 **Rummel, M. J., et al.:** Bendamustine plus rituximab versus CHOP plus rituximab as first-line treatment for patients with indolent and mantle-cell lymphomas: an open-label, multicentre, randomised, phase 3 non-inferiority trial. *Lancet*, 2013, 381, s. 1203–1210.
- 4 **Robak, T., et al.:** Bortezomib-based therapy for newly diagnosed mantle-cell lymphoma. *N Eng J Med*, 2015, 372, s. 944–953.
- 5 **Trněný, M., et al.:** Lenalidomide versus investigator's choice in relapsed or refractory mantle cell lymphoma (MCL-002, SPRINT): a phase 2, randomised, multicentre trial. *Lancet Oncol*, 2016, 17, s. 319–331.
- 6 **Wang, M. L., et al.:** Long-term follow-up of MCL patients treated with single-agent ibrutinib: updated safety and efficacy results. *Blood*, 2015, 126, s. 739–745.
- 7 **Dreyling, M., et al.:** Ibrutinib versus temsirolimus in patients with relapsed or refractory mantle-cell lymphoma: an international, randomised, open-label, phase 3 study. *Lancet*, 2016, 387, s. 770–778.
- 8 **Wang, M. L., et al.:** Acalabrutinib in relapsed or refractory mantle cell lymphoma (ACE-LY-004): a single-arm, multicentre, phase 2 trial. *Lancet*, 2018, 391, s. 659–667.
- 9 **Wang, M. L., et al.:** Ibrutinib in combination with rituximab in relapsed or refractory mantle cell lymphoma: a single-centre, open-label, phase 2 trial. *Lancet Oncol*, 2016, 17, s. 1211–1223.
- 10 **Tam, C. S., et al.:** Ibrutinib plus venetoclax in the treatment of mantle-cell lymphoma. *N Eng J Med*, 2018, 374, s. 323–332.

## Ibrutinib a terapie CNS progrese u pacienta s chemorezistentním lymfomem z pláštových buněk

MUDr. David Šálek Interní hematologická a onkologická klinika, Fakultní nemocnice Brno

- 1 **Salek, D., et al.:** Retrospective analysis of 235 unselected patients with mantle cell lymphoma confirms prognostic relevance of Mantle Cell Lymphoma International Prognostic Index and Ki-67 in the era of rituximab: long-term data from the Czech Lymphoma Project Database. *Leuk Lymphoma*, 2014, 55, s. 802–810.
- 2 **Ponader, S., et al.:** Bruton's tyrosine kinase: From X-linked agammaglobulinemia toward targeted therapy for B-cell malignancies. *J Clin Oncol*, 2014, 32, s. 1830–1839.
- 3 **Cheah, C. Y., et al.:** European mantle cell lymphoma network. Central nervous system involvement in mantle cell lymphoma: clinical features, prognostic factors and outcomes from the European Mantle Cell Lymphoma Network. *Ann Oncol*, 2013, 24, s. 2119–2123.
- 4 **Wang, M. L., et al.:** Long-term follow-up of MCL patients treated with single-agent ibrutinib: updated safety and efficacy results. *Blood*, 2015, 126, s. 739–745.
- 5 **Rule, S., et al.:** Median 3.5-year follow-up of ibrutinib treatment in patients with relapsed/refractory mantle cell lymphoma: a pooled analysis [abstract]. *Blood*, 2017, 130, s. 151.
- 6 **Bernard, S., et al.:** Activity of ibrutinib in mantle cell lymphoma patients with central nervous system relapse. *Blood*, 2015, 126, s. 1695–1698.
- 7 **Tam, C. S., et al.:** Ibrutinib plus venetoclax for the treatment of mantle-cell lymphoma. *N Engl J Med*, 2018, 378, s. 1211–1223.

## Mnohočetná selhání anti-TNF terapie u pacienta s ankylozující spondylitidou

doc. MUDr. Petr Bradna, CSc. II. interní gastroenterologická klinika FN a LF UK v Hradci Králové

- 1 **van der Heijde, D., et al.:** 2016 update of the ASAS-EULAR management recommendations for axial spondyloarthritis. *Ann Rheum Dis*, 2017, 0, s. 1–14.
- 2 **Pavelka, K.:** Doporučení České revmatologické společnosti pro léčbu ankylozující spondylitidy. *Čes Revmatol*, 2012, 20, s. 4–11.
- 3 **Simone, D. – Al Mosavi, M. H. – Bowness, P.:** Progress in our understanding of the pathogenesis of ankylosing spondylitis. *Rheumatology* (Oxford), 2018, 1, suppl. 6, s. vi4–vi9.
- 4 **McGonagle, D. G. – McInnes, I. B. – Kirkham, B. W., et al.:** The role of IL-17A in axial spondyloarthritis and psoriatic arthritis: recent advances and controversies. *Ann Rheum Dis*, 2019, 78, s. 1167–1178.
- 5 **Garcia-Montoya, L. – Marzo-Ortega, H.:** The role of secukinumab in the treatment of psoriatic arthritis and ankylosing spondylitis. *Ther Adv Musculoskelet Dis*, 2018, 10, s. 169–180.
- 6 **Molnar, C. – Scherer, A. – Baraliakos, X., et al.:** TNF blockers inhibit spinal radiographic progression in ankylosing spondylitis by reducing disease activity: results from the Swiss Clinical Quality Management cohort. *Ann Rheum Dis*, 2018, 77, s. 63–69.
- 7 **Van Der Heijde, D. – Deodhar, A. – Wei, J. C., et al.:** Tofacitinib in patients with ankylosing spondylitis: a phase II, 16-week, randomised, placebo-controlled, dose-ranging study. *Ann Rheum Dis*, 2017, 76, s. 1340–1347.
- 8 **Glintborg, B. – Østergaard, M. – Krogh, N. S.:** Clinical response, drug survival and predictors thereof in 432 ankylosing spondylitis patients after switching tumour necrosis factor α inhibitor therapy: results from the Danish nationwide DANBIO registry. *Ann Rheum Dis*, 2013, 72, s. 1149–1155.
- 9 **Favalli, E. G. – Selmi, C. – Becciolini, A., et al.:** Eight-year retention rate of first-line tumor necrosis factor inhibitors in spondyloarthritis: a multicenter retrospective analysis. *Arthritis Care & Research*, 2017, 69, s. 867–874.
- 10 **Mann, H. F. – Závada, J. – Šenolt, L., et al.:** ATTRA Registry: Real world use of secukinumab for treatment of axial spondyloarthritis and psoriatic arthritis: nationwide results from the ATTRA registry. *Clin Exp Rheumatol*, 2019, 37, s. 342–343.
- 11 **Machado, M. A. – Moura, C. S. – Ferré, F., et al.:** Treatment persistence in patients with rheumatoid arthritis and ankylosing spondylitis. *Rev Saude Publica*, 2016, 50, s. 50.
- 12 **Lie, E. – van der Heijde, D. – Uhlig, T., et al.:** Effectiveness of switching between TNF inhibitors in ankylosing spondylitis: data from the NOR-DMARD register. *Ann Rheum Dis*, 2011, 70, s. 157–163.
- 13 **Deodhar, A. – Mease, P. J. – McInnes, P. B., et al.:** Long-term safety of secukinumab in patients with moderate-to-severe plaque psoriasis, psoriatic arthritis, and ankylosing spondylitis: integrated pooled clinical trial and post-marketing surveillance data. *Arthritis Research & Therapy*, 2019, 21, s. 111–122.

## Léčba secukinumabem u pacienta se souběhem těžké formy psoriázy a roztroušené sklerózy

MUDr. Jan Hugo Dermatovenerologická klinika 3. LF UK a FNKV, Praha

- 1 Vanaclocha, F. – Crespo-Erchiga, V., et al.: Immune-mediated inflammatory diseases and/or their comorbidities in patients with psoriasis: baseline characteristics of patients in the AQUILES study. *Actas Dermosifiliogr.*, 2015, 106, s. 35–43.
- 2 Islam, M. M. – Poly, T. N., et al.: Increase risk of multiple sclerosis in patients with psoriasis disease: an evidence of observational studies. *Neuroepidemiology*, 2019, 52, s. 152–160.
- 3 Marrie, R. A. – Patten, S. B., et al.: Increased incidence and prevalence of psoriasis in multiple sclerosis. *Mult Scler Relat Disord*, 2017, 13, s. 81–86.
- 4 Egeberg, A. – Mallbris, L., et al.: Risk of multiple sclerosis in patients with psoriasis: a Danish nation wide cohort study. *J Invest Dermatol*, 2016, 136, s. 93–98.
- 5 Ghaffari, S. A. – Nemati, M., et al.: Circulating concentrations of interleukin (IL)-17 in patients with multiple sclerosis: evaluation of the effects of gender, treatment, disease patterns and IL-23 receptor gene polymorphisms. *Iran J Neurol*, 2017, 16, s. 15–25.
- 6 Marrie, R. A. – Reider, N., et al.: A systematic review of the incidence and prevalence of autoimmune disease in multiple sclerosis. *Mult Scler*, 2015, 21, s. 282–293.
- 7 Balak, D. – Hajdarbegovic, E.: Drug-induced psoriasis: clinical perspectives. *Psoriasis (Auckl)*, 2017, 7, s. 87–94.
- 8 Rocken, M. – Schaller, M., et al.: Color atlas of dermatology. *Yale J Biol Med*, 2012, 85, s. 430–431.
- 9 Walker, F. – Adamczyk, A., et al.: Fumaderm in daily practice for psoriasis: dosing, efficacy and quality of life. *Br J Dermatol*, 2014, 171, s. 1197–1205.
- 10 Gray, O. M. – McDonnell, G. V., et al.: A systematic review of oral methotrexate for multiple sclerosis. *Mult Scler*, 2006, 12, s. 507–510.
- 11 Segal, B. M. – Constantinescu, C. S., et al.: Repeated subcutaneous injections of IL12/23p40 neutralising antibody, ustekinumab, in patients with relapsing-remitting multiple sclerosis: a phase II, double-blind, placebo-controlled, randomised, dose-ranging study. *Lancet Neurol*, 2008, 7, s. 796–804.
- 12 Colombo, M. D. – Cassano, N., et al.: Cyclosporine regimens in plaque psoriasis: an overview with special emphasis on dose, duration, and old and new treatment approaches. *Scientific World Journal*, 2013, 2013, 805705.
- 13 Bissonnette, R. – Luger, T., et al.: Secukinumab demonstrates high sustained efficacy and a favorable safety profile in patients with moderate to severe psoriasis through 5 years of treatment (SCULPTURE Extension Study). *J Eur Acad Dermatol Venereol*, 14. 2. 2018.
- 14 Kemanetzoglou, E. – Andreadou, E.: CNS demyelination with TNF- $\alpha$  blockers. *Curr Neurol Neurosci Rep*, 2017, 17, s. 36.
- 15 Havrdova, E. – Belova, A., et al.: Activity of secukinumab, an anti-IL-17A antibody, on brain lesions in RRMS: results from a randomized, proof-of-concept study. *J Neurol*, 2016, 263, s. 1287–1295.
- 16 Kolbinger, F. – Huppertz, C., et al.: IL-17A and multiple sclerosis: signaling pathways, producing cells and target cells in the central nervous system. *Curr Drug Targets*, 2016, 17, s. 1882–1893.

## Zjednodušení a zefektivnění léčby hypertenze

MUDr. Jan Vachek Klinika nefrologie 1. LF UK a VFN, Praha, Interní oddělení a hemodialyzační středisko, Klatovská nemocnice, a. s.

MUDr. Adéla Maříková Interní oddělení a hemodialyzační středisko, Klatovská nemocnice, a. s.

- 1 Wald, D. S. – Law, M. – Morris, J. K., et al.: Combination therapy versus monotherapy in reducing blood pressure: meta-analysis on 11,000 participants from 42 trials. *Am J Med*, 2009, 122, s. 290–300.
- 2 Borghi, C. – Morbini, M. – Cicero, A. F., et al.: Combination therapy in the extended cardiovascular continuum a focus on perindopril and amlodipine. *J Cardiovasc Med*, 2015, 16, s. 390–399.
- 3 Hermida, R. C. – Crespo, J. J. – Dominguez-Sardina, M., et al.: Bedtime hypertension treatment improves cardiovascular risk reduction: the Hygia Chronotherapy Trial. *Eur Heart J*, 2019, Epub před tiskem.
- 4 de Zeeuw, D. – Anzalone, D. A. – Cain, V. A., et al.: Renal effects of atorvastatin and rosuvastatin in patients with diabetes who have progressive renal disease (PLANET I): a randomised clinical trial. *Lancet Diabetes Endocrinol*, 2015, 3, s. 181–190.
- 5 Borghi, C. – Morbini, M. – Cicero, A. F., et al.: Combination therapy in the extended cardiovascular continuum a focus on perindopril and amlodipine. *J Cardiovasc Med*, 2015, 16, s. 390–399.

## 8% kapsaicin (Qutenza) v léčbě periferní neuropatické bolesti (postherpetické neuralgie)

doc. MUDr. Jitka Fricová, Ph.D. Centrum pro léčbu bolesti, Klinika anestezioologie a resuscitace a intenzivní medicíny, 1. LF UK a VFN, Praha

- 1 Jensen, T. S. – Høye, K. – Fricová, J., et al.: Tolerability of the capsaicin 8% patch following pretreatment with lidocaine or tramadol in patients with peripheral neuropathic pain: a multicentre, randomised, assessor-blinded study. *Eur J Pain*, 2014, 18, s. 1240–1247.
- 2 McCormack, P. L.: Capsaicin dermal patch: In non-diabetic peripheral neuropathic pain. *Drugs*, 2010, 70, s. 1831–1842.
- 3 Informace k predeplisování a použití přípravku Qutenza, SÚKL
- 4 Dostupné z: [https://www.ema.europa.eu/en/documents/product-information/qutenza-epar-product-information\\_cs.pdf](https://www.ema.europa.eu/en/documents/product-information/qutenza-epar-product-information_cs.pdf), vyhledáno 19. 11. 2019.
- 5 Dostupné z: <http://www.sukl.cz/modules/medication/detail.php?code=0149227&tab=prices>, vyhledáno 19. 11. 2019.

## Chronická obstrukční plicní nemoc – léčba šitá na míru

doc. MUDr. Václava Bártů, Ph.D. Pneumologické oddělení, Medicon, a. s., Praha

- 1 Global Strategy for the Diagnosis, Management and Prevention of COPD, Global Initiative for Chronic Obstructive Lung Disease (GOLD) 2019. Dostupné z: <http://goldcopd.org>.
- 2 Mapel, D. W. – Dalal, A. A. – Blanchette, Ch. M., et al.: Severity of COPD at initial spirometry-confirmed diagnosis: data from medical charts and administrative claims. *Int J COPD*, 2011, 6, s. 573–581.
- 3 Kobližek, V., et al.: Doporučený postup pro diagnostiku a léčbu stabilní CHOPN. ČPFS, 2013, dostupné z: [www.pneumologie.cz](http://www.pneumologie.cz).
- 4 Roche, N. – Small, M. – Broomfield, S., et al.: Real World COPD: Association of morning symptoms with clinical and patient reported outcomes. *COPD*, 2013, 10, s. 679–686.
- 5 Bártů, V.: Nová duální kombinace aclidinium bromidu a formoterolu maramátu. *Remedia*, 2015, 6, s. 392–394.
- 6 Decramer, M. – Cooper, Ch. B.: Treatment of COPD: the sooner the better? *Thorax*, 2010, 65, s. 837–841.
- 7 Vestbo, J. – Hurd, S. S. – Agusti, A. G., et al.: Global strategy for the diagnosis, management and prevention of chronic obstructive pulmonary disease. GOLD executive summary. *Am J Respir Crit Care Med*, 2013, 87, s. 347–365.
- 8 Bateman, E. D. – Chapman, K. R. – Singh, A., et al.: Aclidinium bromide and formoterol fumarate as a fixed-dose combination in COPD: pooled analysis of symptoms and exacerbations from two six-month, multicentre, randomised studies (ACLIFORM and AUGMENT). *Respir Res*, 2015, 19, s. 1–13.

## Cornea verticillata a význam jejího odhalení u Fabryho choroby

MUDr. Zora Dubská, CSc. | MUDr. Klára Sedláčková, Ph.D. | MUDr. Jana Becková, CSc. | Ing. Martin Meliška

Oční klinika, 1. LF UK a VFN, Praha

MUDr. Gabriela Dostálková, Ph.D. | MUDr. Lenka Roblová | prof. MUDr. Aleš Linhart, DrSc. II. Interní klinika – klinika kardiologie a angiologie, 1. LF UK a VFN, Praha

MUDr. Petra Reková Neurologická klinika, 1. LF UK a VFN, Praha

MUDr. Vladimíra Fialová oční lékařka, Praha

- 1 Mehta, A. – Beck, M. – Linhart, A., et al.: History of lysosomal storage diseases: an overview. *Fabry Disease: Perspectives from 5 Years of FOS*. Dostupné z: <https://www.ncbi.nlm.nih.gov/>, vyhledáno 6. 12. 2019.
- 2 Mehta, A. – Beck, M. – Sunder-Plassmann, G.: *Fabry Disease: Perspectives from 5 Years of FOS*. Oxford, Oxford PharmaGenesis, 2006.
- 3 Krachmer, L. – Mannis, M. J. – Holland, E.: *Cornea*. Key Features Elsevier, 2010, 3. vydání.
- 4 Dubská, Z. – Sedláčková K. – Becková J., et al.: Význam včasného odhalení očních příznaků Fabryho choroby pro rychlé zahájení léčby a příznivné ovlivnění závažného onemocnění. *Sborník XXVII. kongresu ČOS JEP* 26.–28. září 2019, Hradec Králové, 2019.
- 5 Dostálková, G. – Reková, P. – Sedláčková, K., et al.: Fabryho choroba. *Interní Med*, 2018, 20, s. 10–13.