

Chemotherapy regimens for lymphoma

Chemotherapy drugs for lymphoma are usually given as a 'regimen', a treatment plan that includes more than one type of drug. We have separate information about how **chemotherapy** works, the ways it's given and its possible side effects.

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We have separate information about the topics in **bold font**. Please get in touch if you'd like to request copies or if you would like further information about any aspect of lymphoma. Phone 0808 808 5555 or email information@lymphoma-action.org.uk.

What is a chemotherapy regimen?

A chemotherapy regimen is a treatment plan that usually involves more than one drug. The regimen sets out:

- the name of the drugs
- the dose of each drug
- how often you take the drugs
- **how the drugs are given**
- how long you take each drug for.

Most regimens are given as a block of chemotherapy followed by a rest period to allow your body to recover. This is known as a 'cycle'. Cycles often last between 2 and 4 weeks. A whole course of treatment can vary from a number of weeks to months.

Why is chemotherapy given as a regimen?

Some chemotherapy drugs are given on their own. Examples include pixantrone and bendamustine. You might have a single chemotherapy drug if the aim is to control **symptoms of lymphoma**, rather than to treat the lymphoma itself.

Often, however, a combination of chemotherapy drugs are given to treat lymphoma. Each drug works in a slightly different way to kill the lymphoma cells. Together, the drugs are able to kill more of the lymphoma than if you have them alone. You might be interested in our animation video that explains **how chemotherapy works**.

Chemotherapy drugs are also sometimes given with a different type of drug, such as an **antibody therapy** like **rituximab**, a **targeted drug** like **ibrutinib**, or a **steroid** such as prednisolone.

Common chemotherapy regimens for lymphoma

There are lots of different chemotherapy regimens. Below, we list regimens that are most commonly used for lymphoma. Don't worry if your regimen isn't listed here; your doctors plan the best treatment for you and new regimens become available as they are approved.

The names of chemotherapy regimens are usually acronyms, made up of the first letters of each of the drugs they contain. Sometimes, to make them easier to say, a regimen uses a drug's 'trade' or brand name (the name the pharmaceutical company gives the drug). Trade names start with a capital letter and sometimes have a registered trademark (®).

Some chemotherapy regimens have names that don't use acronyms. These include bendamustine and chlorambucil, which are sometimes given with rituximab to treat some types of lymphoma.

For some types of lymphoma, other drugs are given either alone or with chemotherapy. This is sometimes the case with:

- targeted drugs, such as ibrutinib
- antibody therapies, such as rituximab.

When rituximab is given alongside a chemotherapy regimen, an 'R' is added to the name. Examples include R-CHOP, R-ICE, R-CVP and R-bendamustine. Rituximab is usually used only for **B-cell non-Hodgkin lymphomas**.

Acronyms for chemotherapy regimens sometimes used to treat lymphoma

ABVD – doxorubicin (**Adriamycin**®), **bleomycin**, **vinblastine** and **dacarbazine**

BEACOPP – **bleomycin**, **etoposide**, doxorubicin (**Adriamycin**®), **cyclophosphamide**, **vincristine** (**Oncovin**®), **procarbazine** and **prednisolone**; a higher-dose regimen is sometimes called **BEACOPPesc** (**escalated dose**)

BEAM – **carmustine** (**BiCNU**®), **etoposide**, **cytarabine** (**Ara-C**) and **melphalan**

CHEOP – **cyclophosphamide**, doxorubicin (or **hydroxydaunorubicin**), **etoposide**, **vincristine** (**Oncovin**®) and **prednisolone**

ChIVPP – **chlorambucil**, **vinblastine**, **procarbazine** and **prednisolone**

CHOP – **cyclophosphamide**, doxorubicin (or **hydroxydaunorubicin**), **vincristine** (**Oncovin**®) and **prednisolone**

CHVPi – **cyclophosphamide**, doxorubicin (or **hydroxydaunorubicin**), **etoposide** (**Vepesid**®), **prednisolone** and **interferon-alfa**

CODOX-M – **cyclophosphamide**, **vincristine** (**Oncovin**®), **doxorubicin** and **methotrexate**

CVP – **cyclophosphamide**, **vincristine** and **prednisolone**

DA-EPOCH – **dose-adjusted etoposide**, **prednisolone**, **vincristine** (**Oncovin**®), **cyclophosphamide** and doxorubicin (or **hydroxydaunorubicin**)

DHAP – **dexamethasone**, **high-dose cytarabine** (**Ara-C**) and **cisplatin** (**Platinol**®)

ESHAP – **etoposide**, **methylprednisolone** (**Solu-Medrone**®), **high-dose cytarabine** (**Ara-C**) and **cisplatin** (**Platinol**®)

FC – **fludarabine** and **cyclophosphamide**

GCVP – **gemcitabine**, **cyclophosphamide**, **vincristine** and **prednisolone**

GDP – **gemcitabine**, **dexamethasone** and **cisplatin** (**Platinol**®)

GEMOX – **gemcitabine** and **oxaliplatin**

GEM-P – **gemcitabine**, **cisplatin** and **methylprednisolone**

Hyper-CVAD – cyclophosphamide, vincristine, doxorubicin (Adriamycin®) and dexamethasone; 'hyper' is short for 'hyperfractionated', which means that you have the same drug more than once in a day

ICE – ifosfamide, carboplatin and etoposide

IGEV – ifosfamide, gemcitabine and vinorelbine

IVAC – ifosfamide, etoposide (VP-16) and cytarabine (Ara-C)

Maxi-CHOP – maximum dose cyclophosphamide, doxorubicin (or hydroxydaunorubicin), vincristine (Oncovin®) and prednisolone

MCP – mitoxantrone, chlorambucil and prednisolone

P-MitCEBO – prednisolone, mitoxantrone, cyclophosphamide, etoposide, bleomycin and vincristine (Oncovin®)

Macmillan Cancer Support has an [online tool](#) where you can search for a chemotherapy regimen and find out more about it.

Frequently asked questions about chemotherapy regimens

Which regimen will I have?

The regimen you have depends on a number of factors including:

- the **type of lymphoma** you have
- how quickly the lymphoma is growing – whether it's fast-growing (**high-grade**) or slow-growing (**low-grade**)
- where in your body the lymphoma is
- the **symptoms** or problems your lymphoma is causing
- whether you have previously had other treatments for lymphoma
- whether or not you have **other health conditions** and whether you're on other medication
- your age, general health and fitness.

Your medical team will talk to you about the best treatment for you based on your individual circumstances.

How will I know if the treatment is working?

Once you've had a few cycles of treatment, you'll have **tests and scans** to see if the treatment is working. In some cases, your medical team might recommend changes to your treatment plan, for example:

- increasing or decreasing the dose of chemotherapy drugs
- changing one or more of the chemotherapy drugs in the regimen.

What side effects will I have?

Treatment affects each person differently – even if you have the same treatment as someone else, you might experience different side effects. Your doctor, clinical nurse specialist or chemotherapy nurse should speak to you about any **side effects** and **late effects** you might expect from your chemotherapy regimen.

Macmillan Cancer Support's **online tool** lists common side effects of different chemotherapy regimens.

References

The full list of references for this page is available on our website. Alternatively, email publications@lymphoma-action.org.uk or call 01296 619409 if you would like a copy.

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✓	Approved by experts
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