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利妥昔单抗联合常规化疗治疗B细胞淋巴瘤随机对照试验的Meta分析 [点此下载全文](#)

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摘要:

目的: 用Meta分析的方法系统评价利妥昔单抗(rituximab)联合常规化疗治疗B细胞淋巴瘤的有效性和安全性。方法: 计算机检索EMBASE、PUBMED、Cochrane图书馆、VIP、CNKI、CBM数据库, 全面收集有关利妥昔单抗联合常规化疗治疗B细胞淋巴瘤的随机对照试验(randomized controlled trial, RCT)论文, 两名评价者单独评价纳入研究的方法学质量并提取资料, 用RevMan 5.0软件进行Meta分析。结果: 共纳入10篇RCT文献, Meta分析结果显示, 与常规化疗相比, 利妥昔单抗联合常规化疗提高了B细胞淋巴瘤患者的总生存时间[HR=0.64, 95%CI (0.53, 0.77)]和总有效率[RR=1.21, 95%CI (1.11, 1.32)]。两组的不良反应在3/4级感染、3/4级血小板减少症方面差异无统计学意义, 其相对危险度(95%CI)分别为1.15 (0.58, 2.30)、1.04 (0.71, 1.52); 而在3/4级粒细胞减少症、3/4级白细胞减少症、3/4级发热方面差异有统计学意义, 其相对危险度(95%CI)分别为1.16 (1.02, 1.31)、1.31 (1.12, 1.53)、3.49 (1.56, 7.78)。结论: 利妥昔单抗联合常规化疗可以显著提高B细胞淋巴瘤患者的总生存时间和总有效率, 但3/4级粒细胞减少症、3/4级白细胞减少症、3/4级发热的发生率较高

关键词: [B细胞淋巴瘤](#) [利妥昔单抗](#) [Meta分析](#)

Rituximab combined with routine chemotherapy in treatment of B-cell lymphoma: A Meta analysis of randomized controlled trials [Download Fulltext](#)

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Abstract:

Objective: To systematically assess the efficacy and safety of rituximab combined with routine chemotherapy in the treatment of B-cell lymphoma by Meta-analysis. Methods: We searched Embase, Pubmed, the Cochrane Library, VIP, CNKI, and CBM literature databases for randomized controlled trials (RCTs) of rituximab combined with routine chemotherapy in the treatment of B-cell lymphoma. Two reviewers independently assessed the quality of the included studies and extracted the data. The data were analyzed by Review Manager software (version 5.0). Results: Ten RCTs were finally included in the present analysis, and the results showed that rituximab combined with routine chemotherapy improved the overall survival rate (HR=0.64, 95% CI [0.53, 0.77]) and overall response rate (RR=1.21, 95% CI [1.11, 1.32]) of B-cell lymphoma patients compared with routine chemotherapy. There was no statistical difference between the two groups in 3/4 grade infection, 3/4 grade thrombocytopenia, with the relative risk being 1.15 (0.58, 2.30) and 1.04 (0.71, 1.52), respectively. There was significant difference in 3/4 grade granulocytopenia, 3/4 grade granulocytopenia, 3/4 grade leukocytopenia, and 3/4 grade fever, with the relative risk being 1.16 (1.02, 1.31), 1.31 (1.12, 1.53) and 3.49 (1.56, 7.78), respectively. Conclusion: Rituximab combined with routine chemotherapy can improve the overall survival rate and overall response rate of B-cell lymphoma patients, but results in a higher incidence of 3/4 grade granulocytopenia, 3/4 grade granulocytopenia, 3/4 grade leukocytopenia, and 3/4 grade fever.

Keywords: [B-cell lymphoma](#) [rituximab](#) [chemotherapy](#) [Meta analysis](#)

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