



## Progress in the Management and Treatment of Diffuse Large B-Cell Lymphoma: Diagnosis, Risk Stratification and Novel Target Therapeutic Approaches

Guest Editor:

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### Message from the Guest Editor

Dear Colleagues,

Since 2002, the addition of rituximab has improved the efficacy of the CHOP regimen in diffuse large B-cell lymphoma (DLBCL), with 55–60% of patients being cured, and it is still the standard of care today. However, 40–45% fail, and this has prompted many attempts to improve the efficacy of first-line treatment in DLBCL.

Genetic subgroups, such as high-grade B-cell lymphomas with genetic anomalies of MYC, and/or other genes, such as BCL2, have been described, but they require a better description. Many attempts to improve the efficacy of first-line treatment in DLBCL have been studied in order to pass over the “wall” of R-CHOP, unfortunately with conflicting results. The introduction of novel targeted agents along with chemoimmunotherapy, or the introduction of novel antibodies and/or cellular immunotherapies, such as CART, promises to improve the outcomes of DLBCL.

With this Special Issue, I am proposing an extended review on these open issues and novel therapeutic approaches in DLBCL, with the aim to improve our knowledge in the management and treatment of DLBCL, focusing on the most aggressive subgroups.





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## Message from the Editor-in-Chief

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