

PROVINCIAL FUNDING SUMMARY

Ibrutinib (Imbruvica) for Chronic Lymphocytic Leukemia/Small Lymphocytic Lymphoma (pCODR 10043)

pERC Recommendation: Recommends with conditions
For further details, please see [pERC Final Recommendation](#)

Notification to Implement Issued by pCODR: March 20, 2015

This information is current as of October 5, 2018.

Note: Funding criteria as listed on the decision date. Please refer to the provincial drug programs for the most recent funding criteria and program eligibility.

PROVINCE	STATUS	FUNDING DATE	FUNDING CRITERIA
BC	Funded	Dec 1, 2015	Chronic lymphocytic leukemia or small lymphocytic lymphoma with or without chromosome 17 p deletion, who have received at least one prior therapy and are considered inappropriate for treatment or retreatment with a fludarabine-based regimen including short progression-free interval after previous treatment.
AB	Funded	Aug 6, 2015	Ibrutinib for patients with CLL/SLL who have received at least one prior therapy and are considered inappropriate for treatment or retreatment with a fludarabine based regimen.
SK	Funded	Oct 1, 2015	For patients with CLL/SLL who have received at least one prior therapy, for which one line of therapy was a chemo-immunotherapy combination, and who have relapsed within 3 years since chemo-immunotherapy, or for patients who have relapsed greater than 3 years since chemo-immunotherapy and re-treatment with chemo-immunotherapy is not clinically appropriate. For the first line treatment of patients with deletion 17p CLL/SLL.
MB	Funded	Jan 18, 2016	For patients with chronic lymphocytic leukemia (CLL)/small lymphocytic lymphoma (SLL) who have received at least one prior therapy and are considered inappropriate for treatment or retreatment with a fludarabine-based regimen.

PROVINCE	STATUS	FUNDING DATE	FUNDING CRITERIA
ON	Funded	Jul 14, 2015	Updated criteria December 28, 2017: Funding criteria: 1. Treatment naïve patients with chronic lymphocytic leukemia (CLL)/small lymphocytic lymphoma (SLL) For patients with previously untreated chronic lymphocytic leukemia (CLL)/small lymphocytic lymphoma (SLL) who present with one of the following cytogenetic markers: • chromosome 17p deletion; OR • TP 53 mutation; OR • unmutated immunoglobulin heavy chain variable region (IgHV) Renewal criteria : Patient has experienced no disease progression while on Imbruvica therapy. Initial and renewal approval period: 1 year. 2. Treatment of relapsed/refractory chronic lymphocytic leukemia (CLL)/small lymphocytic lymphoma (SLL) -Initial criteria for Relapsed/Refractory CLL/SLL: -For patients with chronic lymphocytic leukemia (CLL)/small lymphocytic lymphoma (SLL) who have received at least one prior therapy and are considered inappropriate for treatment or retreatment with a fludarabine-based regimen. - Renewal criteria : Patient has experienced no disease progression while on Imbruvica therapy. Initial and renewal approval period: 1 year.
NS	Funded	Nov 2, 2015	As a treatment option for patients with relapsed and/or refractory chronic lymphocytic leukemia (CLL) or small lymphocytic leukemia (SLL) who have received at least one prior therapy and are considered inappropriate for treatment or retreatment with a fludarabine-based regimen, including : • Patients who received prior fludarabine-based treatment and had a progression free interval of less than three years • Patients who received prior fludarabine-based treatment and had a progression free interval of greater than three years, but are now considered unfit for fludarabine-based retreatment due to age ≥ 70, or age ≥ 65 and the presence of comorbidities (Cumulative Illness Rating Scale [CIRS] ≥ 6 or creatinine clearance <70ml/min) • Patients who did not receive prior fludarabine-based treatment because they were considered unfit, and who relapsed after at least two cycles of alkylator-based therapy, regardless of the progression free interval after that therapy.
NB	Funded	Oct 14, 2015	For the treatment of patients with chronic lymphocytic leukemia (CLL)/small lymphocytic lymphoma (SLL) who have received at least one prior therapy and are considered inappropriate for treatment or retreatment with a fludarabine-based regimen.

PROVINCE	STATUS	FUNDING DATE	FUNDING CRITERIA
NL	Funded	Dec 1, 2015	For patients with chronic lymphocytic leukemia (CLL)/small lymphocytic lymphoma (SLL) who have received at least one prior therapy and are considered inappropriate for treatment or re-treatment with a fludarabine-based regimen.
PEI	Funded	Aug 1, 2018	For patients with chronic lymphocytic leukemia (CLL)/small lymphocytic lymphoma (SLL) who have received at least one prior therapy and are considered inappropriate for treatment or re-treatment with a fludarabine-based regimen. The request for coverage must be made and the medication prescribed by a specialist in haematology or medical oncology, or a general practitioner acting under the direction of those specialists.