

PROVINCIAL FUNDING SUMMARY

Blinatumomab (Blinicyto) for Acute Lymphoblastic Leukemia (pediatric) (10099)

pERC Recommendation: Recommends

For further details, please see [pERC Final Recommendation](#)

Notification to Implement Issued by pCODR: September 8, 2017

This information is current as of March 1, 2020.

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 | FUNDING STATUS | FUNDING DATE | FUNDING CRITERIA |
|----------|--------------------------------|--------------|--|
| BC | Funded | Sep 1, 2019 | Treatment of pediatric patients with Philadelphia chromosome-negative (Ph-) relapsed or refractory pre-B-cell acute lymphoblastic leukemia using blinatumomab. |
| AB | Under provincial consideration | | |
| SK | Funded | May 1, 2019 | Treatment of pediatric patients with Philadelphia chromosome-negative (Ph-) relapsed or refractory B precursor acute lymphoblastic leukemia (ALL) who are in second or later relapse, or who relapsed after allogeneic hematopoietic stem cell transplant (alloHSCT), or who have refractory disease; treatment should be for patients with a good performance status and no active central nervous system disease. |
| MB | Funded | Jun 1, 2019 | Pediatric patients with Philadelphia-chromosome negative (Ph-) relapsed or refractory B precursor acute lymphoblastic leukemia (ALL) who are in second or later relapse, or who relapsed after allogeneic hematopoietic stem cell transplant (alloHSCT), or who have refractory disease. Treatment should be in patients with good performance status and no active central nervous system disease. |
| ON | Funded | Jun 12, 2019 | For the treatment of pediatric patients with Philadelphia chromosome-negative (Ph-) relapsed or refractory B precursor acute lymphoblastic leukemia (ALL) who are in second or later relapse, or who relapsed after allogeneic hematopoietic stem cell transplant (alloHSCT), or who have refractory disease. Treatment should be in patients with a good performance status and no active central nervous system disease. |

| PROVINCE | FUNDING STATUS | FUNDING DATE | FUNDING CRITERIA |
|----------|--------------------------------|--------------|--|
| NS | Funded | Dec 1, 2019 | As a single agent treatment option for pediatric patients with Philadelphia chromosome negative (Ph-) relapsed or refractory B precursor acute lymphoblastic leukemia (ALL) who are in second or later relapse, or who relapsed after allogeneic hematopoietic stem cell transplant (alloHSCT), or who have refractory disease. Treatment should be in patients with a good performance status and no active central nervous system disease. Blinatumomab should be administered as a four week continuous infusion followed by two weeks off treatment. Patients achieving a complete response within the first two treatment cycles can receive up to three additional cycles of blinatumomab to a maximum of five cycles. |
| NB | Funded | Nov 1, 2019 | For the treatment of pediatric patients with Philadelphia chromosome negative (Ph-) relapsed or refractory B-cell precursor acute lymphoblastic leukemia who are in second or later relapse, or who relapsed after allogeneic hematopoietic stem cell transplant, or who have refractory disease. Patients must have a good performance status and no active central nervous system disease. |
| NL | Under provincial consideration | | |
| PEI | Under provincial consideration | | |

Under provincial consideration means that the province is reviewing pCODR's recommendation. This may include the province working with the drug manufacturer to reach an agreement for a drug product that both parties can accept, in particular in cases where the pCODR Expert Review Committee has recommended that the drug be funded only on the condition of cost-effectiveness being improved to an acceptable level. This may occur before or after the pan-Canadian Pharmaceutical Alliance negotiations. Please contact the specific provincial drug program and/or cancer agency in your province for information about the status of a given drug product.