

PROVINCIAL FUNDING SUMMARY

Blinatumomab (Blincyto) for Philadelphia Chromosome positive B-cell precursor Acute Lymphoblastic Leukemia (pCODR 10146)

pERC Recommendation: Recommends with conditions For further details, please see <u>pERC Final Recommendation</u>

Notification to Implement Issued by pCODR: April 22, 2019

This information is current as of August 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	May 1, 2020	 Adult patients with Ph-positive pre-B cell acute lymphoblastic leukemia (ALL) Relapsed or refractory after at least one of the followings: Refractory to induction or to salvage chemotherapy Relapse within 12 months of first remission (CR1) Relapse or refractory after second generation tyrosine kinase inhibitor (TKI), or intolerant to second or later generation TKI, or refractory or intolerant to imatinib Relapse at any time after allo-HSCT; no active GVHD and no immunosuppressive medications ECOG PS: 0-2 Available social support and ability to safely receive blinatumomab via an out-patient pump No clinically relevant CNS pathology or active CNS disease Alkaline Phosphatase, ALT <5 X ULN; Total Bilirubin < 1.5 ULN; Serum creatinine < 1.5 ULN. Prescribed by Leukemia/BMT Program physicians and delivered at Vancouver General Hospital NOTE: A BC Cancer "Compassionate Access Program" request with appropriate clinical information for each patient must be approved prior to treatment (please refer to https://cap.phsa.ca/).
АВ	Under provincial consideration		

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PROVINCE	FUNDING STATUS	FUNDING DATE	FUNDING CRITERIA
SK	Funded	Sep 3, 2019	Treatment of adult patients with Philadelphia chromosome-positive (Ph+) relapsed or refractory B-cell precursor acute lymphoblastic leukemia (ALL); treatment should be for patients with a good performance status and patients may be treated for up to 2 cycles of induction and 3 cycles of consolidation Notes (Adult BCP-ALL): - Patients must have CD19 positive B-cell precursor ALL to be eligible for Blinatumomab -In (Ph)-positive B-cell precursor ALL with an overt relapse, defined as the need for repeat induction chemotherapy, physicians may choose Blinatumomab after failure of a first-line tyrosine kinase inhibitor (TKI); in all other (Ph)-positive patients there is a requirement for a trial of a second-line TKI prior to accessing Blinatumomab.
МВ	Funded	Nov 1, 2019	Adult patients with Philadelphia chromosome- positive B-cell precursor acute lymphoblastic leukemia who have been treated with at least two prior tyrosine kinase inhibitors and have relapsed or refractory disease Note: For patients with overt relapse of Philadelphia chromosome positive ALL (defined as the need for repeat induction chemotherapy - to move from first line TKI directly to blinatumomab or inotuzumab ozogamicin instead of requiring a second TKI and further induction chemotherapy is allowed).
ON	Funded	Feb 25, 2020	Adult patients with Philadelphia chromosome-positive B-cell precursor acute lymphoblastic leukemia (Ph+ BCP-ALL) who have been treated with at least two prior tyrosine kinase inhibitors (TKIs) and have relapsed or refractory (R/R) disease. Treatment should be for patients with good performance status. Sequencing of blinatumomab and inotuzumab ozogamicin in curative situations for relapsed Ph+ BCP-ALL. Curative situation is defined as a goal to take the patient to transplant if response can be achieved.
NS	Funded	Dec 1, 2019	As a single agent treatment option in adult patients with Philadelphia chromosome-positive (Ph+) B precursor acute lymphoblastic leukemia (ALL) and who have been treated with at least two prior tyrosine kinase inhibitors and have relapsed or refractory disease. Treatment should be in patients with a good performance status.



PROVINCE	FUNDING STATUS	FUNDING DATE	FUNDING CRITERIA
NB	Funded	Nov 1, 2019	For the treatment of adult patients with Philadelphia chromosome positive (Ph+) B-cell precursor acute lymphoblastic leukemia who have been treated with at least two prior tyrosine kinase inhibitors and have relapsed or refractory disease. Patients must have a good performance status. Treatment should be discontinued upon disease progression or unacceptable toxicity, up to a maximum of 2 cycles for induction and 3 cycles for consolidation.
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.