

## PROVINCIAL FUNDING SUMMARY

Pralatrexate (Folotyn) for Peripheral T-Cell Lymphoma (pCODR 10138)

pERC Recommendation: Recommends with conditions

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

Notification to Implement Issued by pCODR: April 22, 2019

This information is current as of October 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	Apr 1, 2020	<p>Relapsed or refractory peripheral T-cell lymphoma (PTCL) with at least one prior treatment</p> <ul style="list-style-type: none"> <li>• ECOG 0-2</li> <li>• Adequate marrow reserve (ANC greater than <math>1 \times 10^9/L</math>, platelets greater than or equal to <math>100 \times 10^9/L</math>)</li> <li>• Adequate renal function creatinine clearance greater than or equal to 30 mL/min</li> <li>• Adequate liver function (bilirubin less than or equal to 26 micromol/L, ALT less than or equal to 2.5 x ULN)</li> <li>• Patients are eligible to either romidepsin (ULYROMI) or pralatrexate (ULYPRA)</li> </ul> <p>NOTE: A Compassionate Access Program (CAP) approval is required prior to the initiation of treatment (please refer to <a href="https://cap.phsa.ca/">https://cap.phsa.ca/</a>)</p>
AB	Funded	Sep 15, 2020	<p>For the treatment of patients with relapsed or refractory peripheral T-cell lymphoma (PTCL) who have undergone previous systemic therapy, none of which include romidepsin. Patients should have good performance status. Treatment should continue until disease progression or unacceptable toxicity. Physicians may choose either pralatrexate or romidepsin in an individual patient but not both (unless due to intolerance, cannot sequence due to progression).</p>
SK	Funded	Jun 1, 2020	<p>Treatment of relapsed or refractory peripheral T-cell lymphoma (PTCL) in patients who have undergone previous systemic therapy, none of which include Romidepsin Notes: All subtypes of peripheral T-cell lymphomas (PTCL) are eligible, including: -Peripheral T-cell lymphoma, not otherwise specified (PTCL, NOS) -Anaplastic large cell lymphoma, primary systemic type (ALCL), ALK negative or positive -Angioimmunoblastic T-cell lymphoma (AITL) -Extranodal NK/T cell</p>

PROVINCE	FUNDING STATUS	FUNDING DATE	FUNDING CRITERIA
			lymphoma, nasal type -Enteropathy associated T-cell lymphoma (EATL) -Hepatosplenic T-cell lymphoma -Subcutaneous panniculitis-like T-cell lymphoma -Cutaneous $\gamma$ - $\delta$ T-cell lymphoma - Transformed mycosis fungoides (but not cutaneous T-cell mycosis fungoides)
MB	Funded	Jul 22, 2020	<ul style="list-style-type: none"> <li>• For the treatment of patients with relapsed or refractory peripheral T-cell lymphoma (PTCL) who have undergone previous systemic therapy, none of which include romidepsin.</li> <li>• Patients should have a good performance status.</li> </ul>
ON	Funded	Jul 17, 2020	Pralatrexate is used for the treatment of patients with relapsed or refractory peripheral T-cell lymphoma (PTCL) who have undergone previous systemic treatment, none of which include romidepsin. Treatment should be for patients with a good performance status. Patients will be eligible for either pralatrexate or romidepsin, but not both.
NS	Funded	Jul 1, 2020	For the treatment of patients with relapsed or refractory peripheral T-cell lymphoma (PTCL) who have received previous systemic therapy, none of which include romidepsin. Patients should have a good performance status. Treatment with pralatrexate should continue until disease progression or unacceptable toxicity.
NB	Under provincial consideration		
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.