

# Recall the CLL basics before diving into CLL breakthroughs at EHA with memo inHaematology's exclusive interviews and reports

## Epidemiology<sup>1,2</sup>

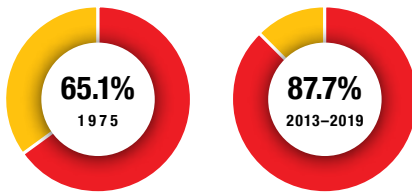
### Age-adjusted incidence

4.4 per 100,000 men and women per year

### Median age at diagnosis

69 years

### 5-year relative survival



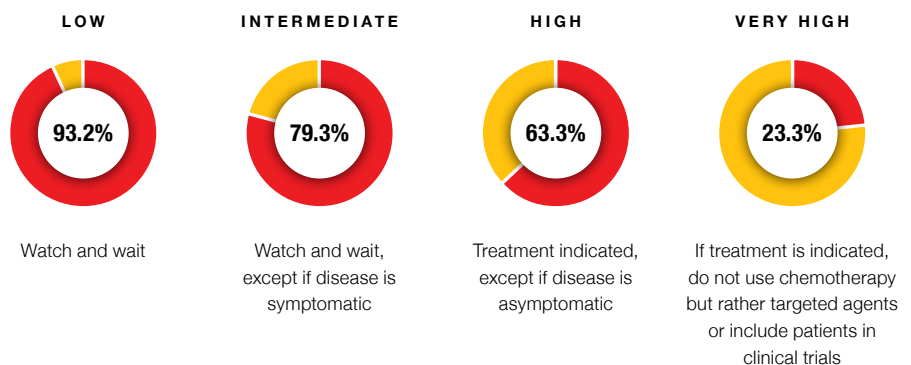
## Genetic markers and their frequency in CLL<sup>1,3,4</sup>

Genetic marker	Frequency	Associated with
altered <i>TP53</i>	~80% with del(17p)	aggressive disease
unmutated <i>IGHV</i>	~40%	aggressive disease
Del(13q)	~55%	favorable prognosis
Del(17p)	~5%–8%	aggressive disease
Del(11q)	~25%	progressive disease
Trisomy 12	~10%–20%	intermediate risk

## CLL-International prognostic index (CLL-IPI)<sup>5</sup>

- *TP53* status (no abnormalities vs. *del17p*, *TP53* mutations, or both)
- *IGHV* mutational status (mutated vs. unmutated)
- Serum  $\beta_2$ -microglobulin concentration ( $\leq 3.5$  mg/L vs.  $> 3.5$  mg/L)
- Clinical stage (Binet A or Rai 0 vs. Binet B-C or Rai I-IV)
- Age ( $\leq 65$  years vs.  $> 65$  years)

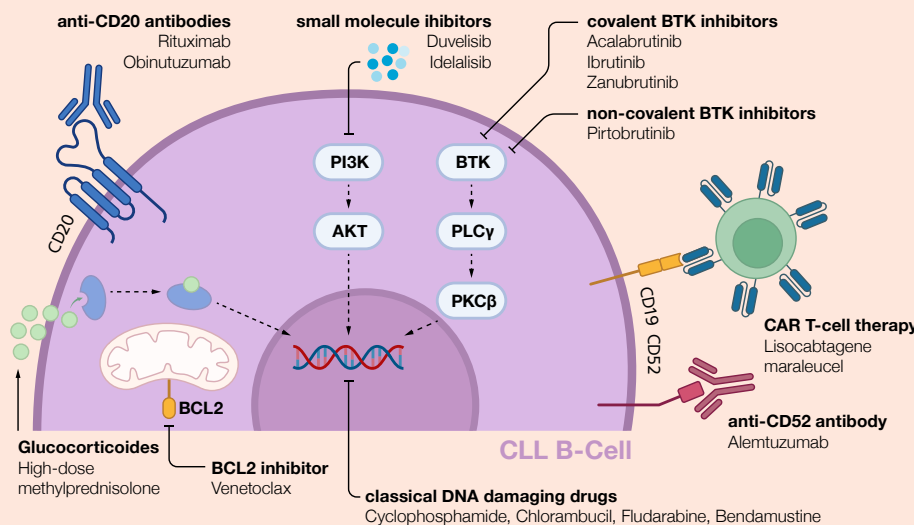
## 5-year survival in CLL-IPI risk categories<sup>1,5</sup>



**Treatment choice** is guided by multiple factors including genetic profile, age, comorbidities, comediations, patient's preference and potential side effects. The figure shows drugs that are currently available to patients with/without *del(17p)/TP53* mutation in 1L, 2L, 3L and the relapsed/refractory setting according to the NCCN treatment considerations.<sup>6</sup>

New investigational agents for CLL in currently recruiting phase 2 and **phase 3** trials, as monotherapy or in combination with other drugs, are alphabetically listed below:<sup>7</sup>

- anti-BlyS antibody: Belimumab
- anti-CD52 antibody: ALLO-647
- ATRi+PARPi: Camonsertib + Olaparib
- BCL2i: **Lisafotoclax**, **Sonrotoclax**, TQB3909
- BTK degrader: BGB-16673
- CAR T-cell therapies
- cBTKi: **Orelabrutinib**, DTRM-12 (+everolimus+pomalidomide)
- CD3xCD20 bispecific antibodies: Epcoritamab, GB261
- c-MYCi: IDP-121
- MDMi: Navtemadlin
- ncBTKi: **Nemtabrutinib**
- PI3Ki: BGB-10188, ZX-101A
- PKCi: MS-553



### References:

1. Hallek M, Al-Sawaf O. Am J Hematol. 2021;96(12):1679-1705.
2. The Surveillance E, and End Results (SEER) Program of the National Cancer Institute. Cancer Stat Facts: Leukemia—Chronic Lymphocytic Leukemia (CLL). Accessed March, 19, 2024, <https://seer.cancer.gov/statfacts/html/clyl.html>.
3. Campo, E., et al. Haematologica. 2018;103(12):1956–1968.
4. Gaidano, G., Rossi, D. Hematology. 2017(1):329–337.
5. International CLL-IPI working group. Lancet Oncol. 2016;17(6):779-790.
6. National Comprehensive Cancer Network © (NCCN ©). NCCN Guidelines Version 2.2024 Chronic Lymphocytic Leukemia/ Small Lymphocytic Lymphoma. Accessed March, 19, 2024, [https://www.nccn.org/professionals/physician\\_gls/pdf/cll.pdf](https://www.nccn.org/professionals/physician_gls/pdf/cll.pdf).
7. Clinicaltrials.gov. (2024). Accessed: 09042024.