Patient Newsletter: Latest Updates in DLBCL Treatment

Lymphoma Australia
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Learning about your lymphoma can be like learning a new language. It takes time and practice. Please keep this document handy so you can refer back to it as often as you need to. It will become easier to understand the more you read it.

There are exciting updates in the treatment of **Diffuse Large B-cell Lymphoma (DLBCL).** In this newsletter, we'll cover three key topics:

1. A new medicine called **Epcoritamab**, that has been provisionally approved in Australia,
2. An important change in **access to CAR T-cell therapy,** and
3. A clinical trial called **POLAR BEAR** that may improve treatment for older patients.

We hope this information helps you understand the latest advancements in DLBCL care. Always speak with your healthcare team to learn what options may be right for you.

New Treatment Update: Epcoritamab

Epcoritamab, (brand name EPKINLY®) is a new **bispecific antibody** treatment. It is now provisionally approved in Australia for people with refractory or relapsed DLBCL.

Provisional approval means the treatment has been approved based on early trials (phases 1 and 2) and can now be given to some patients.

Now, EPKINLY® is approved for **some patients** after just one prior treatment.

Researchers will continue to monitor its safety and effectiveness for ongoing approval. To be eligible for EPKINLY® you need to have already had two lines of treatment for your DLBCL.

Refractory means the lymphoma is not responding to treatment, it may be staying the same or getting worse even with treatment. Relapsed means the treatment initially worked well and you went into remission, but the lymphoma has come back.

What are bispecific antibodies?

Bispecific antibodies are medicines made from antibodies created in a laboratory that can attach to 2 different targets at the same time. It attaches to **T-cells** (a type of disease fighting immune cell) AND to **lymphoma cells**. This brings the T-cell close to the lymphoma and by doing this, it helps your immune system find and destroy the lymphoma.

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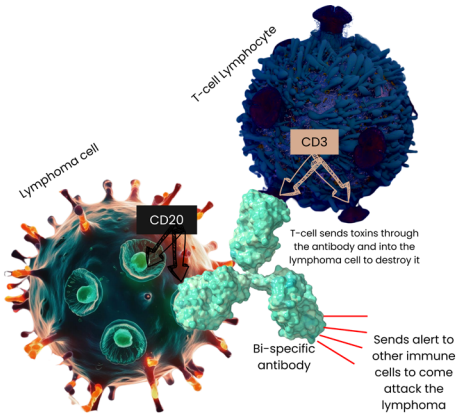

Access to Epcoritamab

Treasurer Jim Chalmers announced in the budget on 25th March that as of May 1st 2025, Epcoritamab will be listed on the Pharmaceutical Benefits Scheme (PBS), making it more affordable.

CAR T-Cell Therapy Now Available as 2nd Line Treatment

CAR T-cell therapy is an advanced treatment that helps your immune system fight the lymphoma. It involves collecting your own immune cells and sending them to the lab to be modified, so they can better recognise the lymphoma. They are then reinfused back into your body ready to find and attack the lymphoma cells.

Previously, Yescarta®, a CAR T-cell therapy by Gilead, was only available as a 3rd line treatment for people with refractory or relapsed DLBCL. This meant you would have had to have had 2 different treatments for the DLBCL before being eligible for CAR T-cell therapy.

Who can have CAR T-cell therapy in 2nd line?

There are certain requirements that need to be met. These include:

- The lymphoma has not responded to your first-line treatment, and you have not achieved remission, **or**
- You went into remission after first-line treatment, but your lymphoma relapsed (came back) within 12 months, **and**
- You are medically able to cope with the treatment – you will need tests to check your kidney, heart and lung function, **and**
- Your lymphoma needs to be stable enough to:
  - ensure safe collection of your own T-cells, and
  - wait the time it takes for the CAR T-cells to be modified in a laboratory, and
  - be well enough for the treatment once they are sent back to your treatment centre (up to 6 weeks).

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There are other things to consider when looking at your eligibility for CAR T-cell treatment. Your haematologist will be able to talk to you about these.

What does this mean?

This change means more people can benefit from CAR T-cell therapy earlier. Accessing this treatment earlier may improve outcomes for patients whose lymphoma has not responded to first-line treatment, or have had their DLBCL relapse after only one-line of treatment.

Ask your doctor if CAR T-cell therapy would be a good option for you.

For more information on CAR T-cell therapy see our factsheet Chimeric Antigen Receptor (CAR) T-cell therapy

Patient and carer education

At Lymphoma Australia we are committed to bringing you the latest updates, and information you need to understand and manage your lymphoma. We regularly hold education sessions online and in-person.

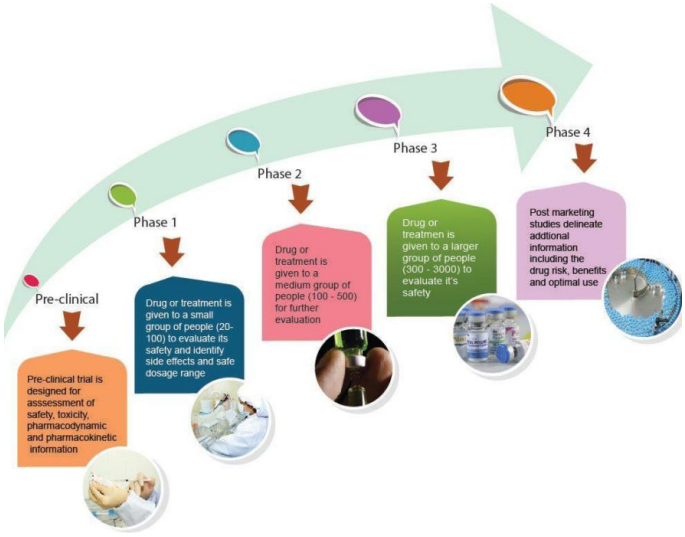
To see what we have coming up visit our events calendar by clicking here. You can also get more information buy giving our nurses a call on **1800 953 081** Monday – Friday 9am-4:30pm Eastern States Time.

Watch our recent webinar on CAR T-cell on YouTube here:

- CAR T-cell therapy and Bispecific antibodies
- CAR T-cell therapy for Regional, Rural and Remote patients

Clinical Trial: POLAR BEAR Study

Clinical trials help researchers improve cancer treatments. The POLAR BEAR study has recently closed but was the only phase 3 clinical trial in Australia researching the effects of a medicine called **polatuzmab-vedotin** in older patients with DLBCL. A phase 3 clinical trial means the treatment is being tested on a large group of patients to confirm its effectiveness and safety before wider approval .



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To be eligible participants needed to:

1. have DLBCL,
2. have never had treatment for DLBCL before, and
3. be at least 75 years of age.

The information from this trial will now be analysed by the researches to see if it has improved outcomes for older people with DLBCL. It can take time to do this, but we will update our website with results when these have been published.

Although POLAR BEAR is now closed, new trials are starting all the time. If you are interested in clinical trials, ask your doctor if there is a clinicalr trial available that you may be suitable for.

There are also other clinical trials available around the world researching how well polatuzumab-vedotin and other treatments can work for people with DLBCL. If you are willing to travel for a clinical trial, let your doctor know so they can look for clinical trials overseas.

For more information on clinical trials see our Understanding Clinical Trials factsheet here.

Polatuzumab-vedotin

Polatuzumab-vedotin, is a **monoclonal antibody conjugate**. A monoclonal antibody conjugate is a targeted therapy that uses specially made antibodies. These antibodies are made in a lab and have a medicine attached to them (the vedotin). Vedotin is toxic to lymphoma cells.

Once in your body, the antibodies seek out and attach to a protein on lymphoma cells called **CD79b**. When the antibody attaches to CD79b, it directly delivers the vedotin into the lymphoma cells. The toxic vedotin then destroys the lymphoma cells.

Also, when the antibody attaches to the lymphoma cells, it sends off signals to your immune system. These signals activate your immune system so it can also start to fight and remove the lymphoma.

The brand name for polatuzumab-vedotin is called Polivy®. It was developed by Genentech – a company owned by Roche.

Polatuzumab-vedotin is currently available in Australia and approved by the Therapeutic Goods Administration (TGA) for use in some people with DLBCL, but more studies are needed to see if it is effective in even more people with different circumstances. However, this medicine is **not listed on the PBS**, which means it can be very expensive. Ask your doctor to explain the costs of having this treatment.

More information

If you would like more information on any of the information in this newsletter, would like to order factsheets to be sent to you in the post, or just want to talk about your lymphoma and options available to you, you can contact our nurses. Our nurses are all highly experienced with many years of experience caring for people with lymphoma.

You can contact them by phone Monday-Friday 9am – 4:30pm Eastern States Time on **1800 953 081**, or by email on nurse@lymphoma.org.au

Summary

New treatments are bringing hope to people with DLBCL. Epcoritamab is now provisionally approved, CAR T-cell therapy is available sooner, and the POLAR BEAR trial testing new options for older patients us currently being assessed. Clinical trials are essential for advancing care, and new options may be available for you. Talk to your doctor about what treatments or trials might be right for you.

Resources and support

Lymphoma Australia offers a wide range of resources and support for people living with lymphoma or CLL, and their carers. How to access our resources:

- **Visit** our website www.lymphoma.org.au for more information.
- **Phone** our Lymphoma Care Nurse Hotline on 1800 953 081.
- **Email** our Lymphoma Care Nurses nurse@lymphoma.org.au
- **Downloadable information:** Visit our website, or give us a call if you would like some more information on a variety topics related to lymphoma
- **Join** our Facebook page Lymphoma Down Under (make sure you complete all the membership questions when you join).

Disclaimer:
This information has been written with care, but it does not include every possible side effect. Talk to your doctor or nurse to learn the full list of side effects for any treatment and what signs mean you should seek help.