



LEUKEMIA &
LYMPHOMA
SOCIETY OF
CANADA®



**Working Together to Foster
Treatment Innovation in
Cancer Care**

Objectives

- To discuss opportunities to accelerate pediatric oncology treatment innovation in Canada
- To provide an outline of the system and process used to evaluate innovative treatments – Health Technology Assessment (HTA) – for public coverage in Canada
- To outline a pathway for nurses to accelerate delivery of innovation

Today's Presentation Partners

Nadine Prévost

Business Unit Director Research & Community Support
Leukemia & Lymphoma Society of Canada

Christina Sit

Manager of Community and Strategic Partnerships
Leukemia & Lymphoma Society of Canada



LLSC Mission

Cure all blood cancers and improve the quality of life of those undergoing a blood cancer experience and their families.

We've made tremendous strides

- Immunotherapies
 - CAR-T
- Precision oncology for treatment
 - NTRK fusions
- Precision oncology for side effects
 - Identifying genes that can explain why 20-50% of children receiving cisplatin have irreversible hearing loss



40%

OF ALL
CHILDHOOD CANCERS
ARE BLOOD CANCERS

ONLY
5%

OF ONCOLOGY DRUGS
HAD AN INITIAL PEDIATRIC
RECOMMENDATION
IN 40 YEARS

THE 5-YEAR AML
SURVIVAL RATES
FOR CHILDREN UNDER
15 YEARS IS

68.7%

ALMOST

80%

OF CHILDHOOD CANCER
SURVIVORS DEVELOP
CHRONIC HEALTH
CONDITIONS
AFTER TREATMENT

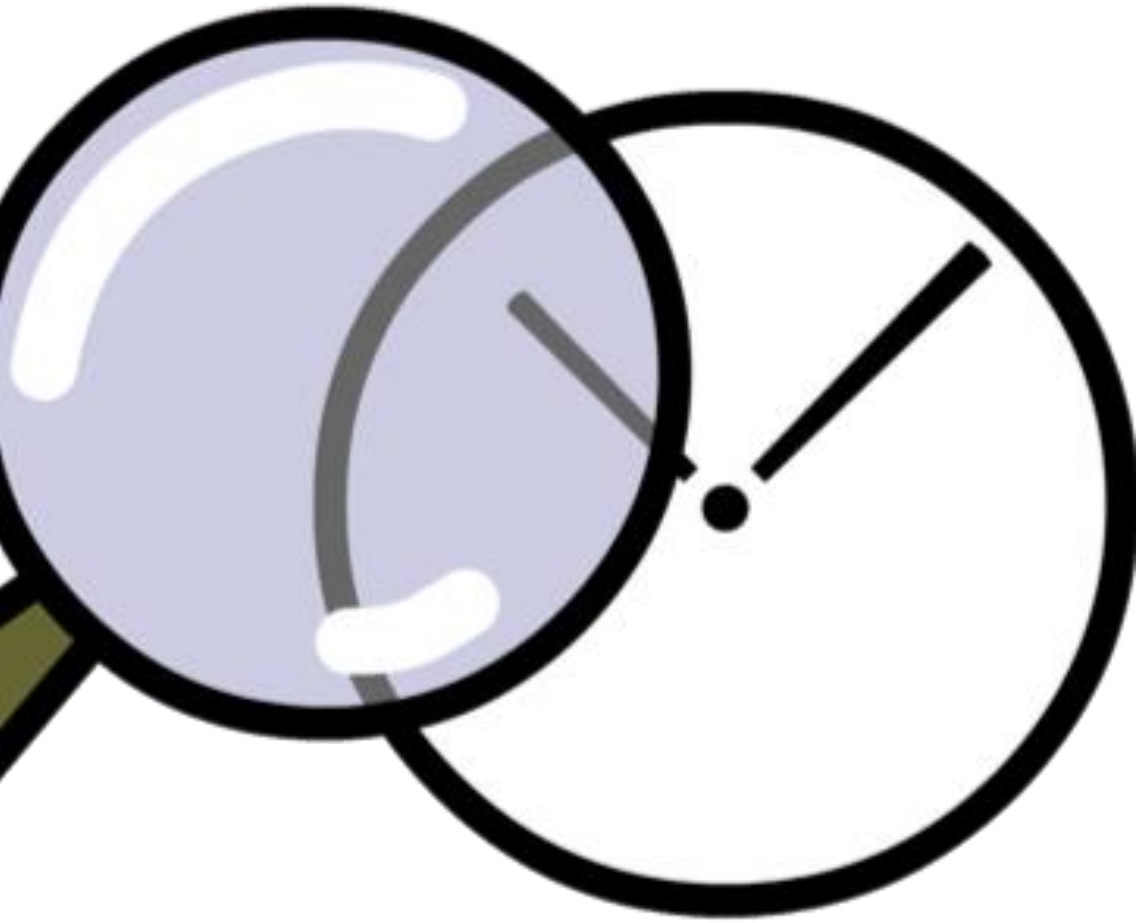
*We still have so much work to do for safer,
less toxic, more effective treatments
for children!*

Nelarabine For Pediatric ALL

5800 Days Between Health
Canada Approval and
Public Reimbursement



Examining 5800 Days:



Trial Issues

System Issues

Economic /
Value Issues

Because Kids
are Different!

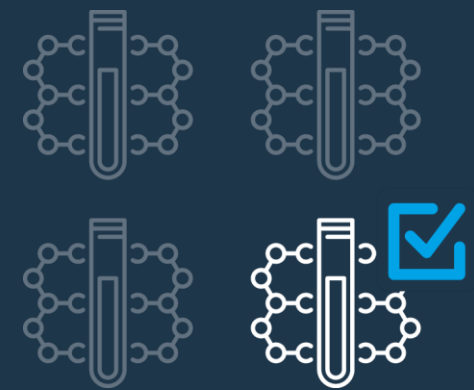
PedAL
Canada





Matching The Right Treatment to the Right Child at the Right Time.

PedAL Master Trial:



Patient

Individual cancer makeup

Trial match result!

It is like the trial version of completing a profile on a dating app so matches can be generated!



Opening more possibilities and quicker matches!



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APAL 2020SC The starting place

Global trial

- US
- Australia
- New Zealand

- 6 children enrolled in Canada

APAL 2020D

The first active treatment trial

Venetoclax in children with relapsed acute myeloid leukemia (AML) with a specific molecular profile

Canadian sites

- IWK
- Sick Kids
- Children's Hospital Winnipeg
- Alberta Children's Hospital
- BC Children's Hospital

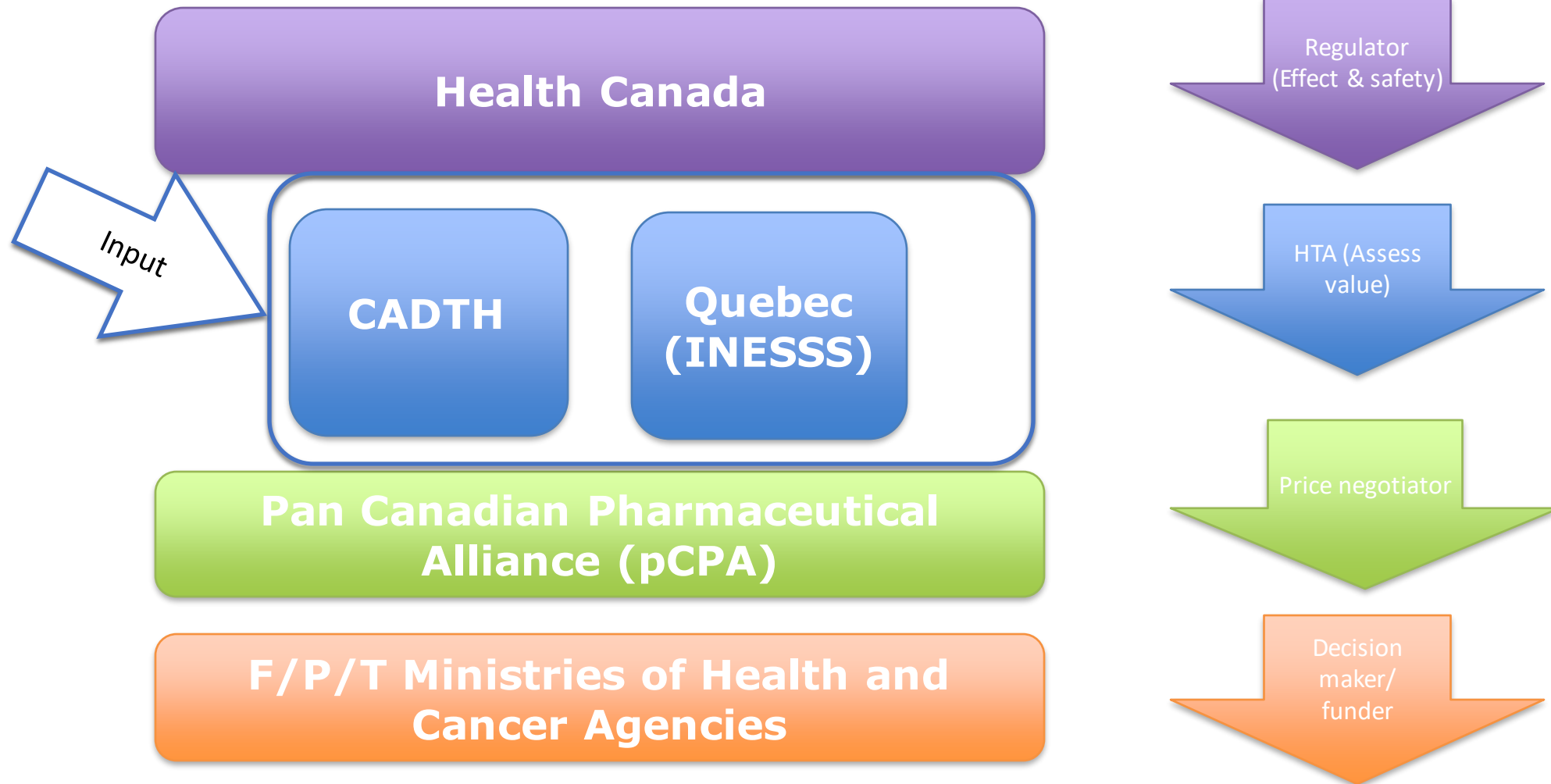


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The Role of Nurses in Accessing Treatment in Canada



Drug Access—Who Does What in Canada?



CADTH Deliberative Framework

Clinical Benefit

Patient Based
Values

Economic
Evaluation

Adoption
Feasibility



The Opportunity



VALUE

PRICE

Traditional Study Results

2.3.1 Chronic GVHD

The efficacy of belumosudil was evaluated in a randomized, multicentre, phase II ROCKstar trial in allogeneic haematopoietic cell transplant (alloHCT) recipients (NCT03640481) [14]. After a median follow-up of 14 months, the best overall response rate (ORR, defined as complete response or partial response; primary endpoint) was 74% (95% CI 62–84%) with belumosudil 200 mg once daily and 77% (95% CI 65–87%) with belumosudil 200 mg twice daily. Responses were observed in all affected organ systems and across all patient subgroups. The ORR was 74% in patients who previously received ibrutinib ($n = 46$) and 68% in patients who previously received ruxolitinib ($n = 38$). In this study, 132 patients aged ≥ 12 years with persistent cGVHD manifestations after receiving 2–5 prior systemic lines of therapy were randomized to receive oral belumosudil 200 mg once or twice daily until clinically significant progression of cGVHD or unacceptable toxicity. Randomization was stratified by cGVHD severity and prior exposure to ibrutinib. At baseline, 99% of patients were receiving concomitant corticosteroids. The median time to response was 5 weeks, with most (91%) responses seen within the first 6 months of treatment. Responses were maintained for ≥ 20 weeks in 59% of patients. The median duration of response was 54 weeks. Clinically meaningful improvement (≥ 7 -point reduction) from baseline in the Lee Symptom Scale (LSS) score was observed in 59% of patients receiving belumosudil 200 mg once daily and 62% of patients receiving belumosudil 200 mg twice daily; LSS improvements were seen in both responders and non-responders. Corticosteroid doses were reduced in 65% of patients. The overall failure-free survival (FFS) rate was 75% at 6 months and 56% at 12 months. The overall survival (OS) rate at 2 years was 89% [14].

Nurses see the people
behind the data.



Patient Group Input – Questions Asked

- Compared to any previous therapies patients have used, what were the benefits experienced? What were the disadvantages?
- How did the benefits and disadvantages impact the lives of patients, caregivers, and families?
- Consider side effects and if they were tolerated or how they were managed.
- Was the drug easier to use than previous therapies?
- Are there subgroups of patients within this disease state for whom this drug is particularly helpful? In what ways?

Clinician Input – Questions Asked

- Which patients would be best suited for treatment with the drug under review? Which patients would be least suitable for treatment with the drug under review?
- What outcomes are used to determine whether a patient is responding to treatment in clinical practice?
- Are outcomes used in clinical practice aligned with the outcomes typically used in clinical trials?
- What would be considered a clinically meaningful response to treatment? Consider the magnitude of the response to treatment.
 - Improved survival; reduction in the frequency/severity of symptoms (provide specifics regarding changes in frequency, severity, etc.); attainment of major motor milestones; ability to perform activities of daily living; improvement of symptoms; and stabilization (no deterioration) of symptoms.



5,800 days (15 years!) and counting...



from Health Canada approval of a pediatric cancer treatment to public reimbursement



Waiting is not an option for kids with cancer!
80% of survivors develop *lifelong health issues* from their cancer treatment



Nurses play a key role in capturing the real-life impact of cancer treatments on children.

www.bloodcancercontinuingeducation.ca



Adult cancer survivorship - What we know (Unit 1)



Acute Lymphoblastic Leukemia (ALL) - Diagnosis, Treatments and Support



Part 1 - Addressing Burnout Series: Getting Off the Path to Burnout



Part 2 - Understand Empathy and Remain Compassionate Series : What Can I Do to Remain

Continuing Education

- Self-study platform presented by experts in their specialty
- CMEs for oncology nurses and community pharmacists
- Certification available
- Free to register
- New training added every month



Adjusting your social life - Siham's Story

In this document, Siham shares her advice on how to adapt your social life and some projects following a cancer diagnosis.

▫ **Leukemia, Mental health and wellness**

**New Resources available
on our website**



Adjusting to physical changes - Christian's Story

In this document, Christian shares his advice on how to adapt to some of the physical changes that can occur following a cancer diagnosis.

▫ **Lymphoma, Mental health and wellness**



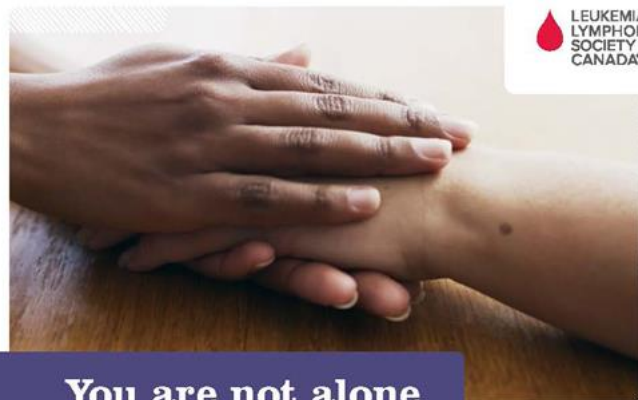
Managing Anxiety - Romy's Story

In this document, Romy shares her advice on how to manage anxiety following a cancer diagnosis.

▫ **Lymphoma, Mental health and wellness**

**Simply
Download
And
Print!**

Tear Pad for easy referral



You are not alone

When you call us, one of our Community Services Managers will personally assist you and your family in several ways:

- 🔴 Listen attentively and with compassion to the challenges you are facing
- 🔴 Point you to the information specific to your type of blood cancer or treatment
- 🔴 Help you to get organized to manage and be involved in your care
- 🔴 Identify services that would be beneficial to you:
 - Connecting with someone who has experienced your type of blood cancer
 - Identifying a support group
 - Contacting a Clinical Trials navigator
 - Accessing a dietitian
 - Helping you ease your treatment travel costs

The services are offered to you at no cost.

There are 137 types of blood cancers.

These cancers affect blood cells, bone marrow, lymph nodes and parts of the lymphatic system.

Blood cancers includes leukemias, lymphomas, myelomas, myelodysplastic syndromes and myeloproliferative neoplasms.

Here for you

Information, understanding and support are a phone call away.

We know that blood cancers can strike anyone, at any age, at any time, without warning. The effects of a diagnosis can have life-changing consequences overnight, impacting families, friends and communities.

The Leukemia and Lymphoma Society of Canada has services to support you and your family: from diagnosis to recovery and beyond.



Get the LLS Health Manager app

Track medications, side effects and more!

Download the App on Apple or Android

Never hesitate to contact us, we're here to help!
bloodcancers.ca • info@bloodcancers.ca • 1 833 222-4884

LLS1134

thank you

A row of ten light-colored wooden blocks, each with a single lowercase letter in black, spelling out the words 'thank you'. The blocks are arranged on a wooden surface. The background is a soft-focus bokeh of warm, golden-yellow lights.