Transcript Details
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EHA 2026: Long-Term Zanubrutinib Outcomes

Announcer:
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Dr. Tedeschi:
Hello, my name is Alessandra Tedeschi. I work in Milano at Niguarda Cancer Center. I am at EHA in Stockholm this moment, and here I will present the data of the SEQUOIA study, but they are related only to patients aged more than 80 years.

This is why, because this population is a very difficult-to-treat population because they are elderly with comorbidities, and there are not many studies addressed to this population, although CLL is a disease of the elderly.

So we took the data from the SEQUOIA trial, in which patients were treated with zanubrutinib in monotherapy for patients with 17p deletion, and for patients without 17p deletion, patients were randomized to zanubrutinib or immunochemotherapy. And we took the patients treated with zanubrutinib in monotherapy, and we put all the patients together.

We have to say that 1/3 of the population had high-risk disease because of 17p deletion, so very hard to treat, not only for the age, but also for the presence of 17p deletion.

We have to say that we had a very good overall response rate, 100% of patients responded to zanubrutinib, and this is the study with the longest follow-up, focusing on this category of patients, elderly—very elderly I would say— with a progression-free survival rate of 64% after 72 months.

So zanubrutinib resulted to be effective even in the 17p-deleted population, elderly population.

But the most important thing is that the rate of adverse events was very low. We have a very low rate of discontinuations in the first 3 years of treatment. And the more importantly, the adverse events adjusted for the time of patients in zanubrutinib were very low, with the rate of atrial fibrillation similar to the one of the age-matched population.

So effective and very well tolerated, so this changed our approach to patients, to the elderly patients. We know that continuous treatment is easy to deliver, and there's another treatment, but we know now that zanubrutinib is effective in this population with a very low rate of adverse events.

Announcer:
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