

### Transcript Details

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### ReachMD

www.reachmd.com  
info@reachmd.com  
(866) 423-7849

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### Anticipated Updates from ASH 2021: What's New in CLL & MCL?

#### Announcer:

You're listening to *Project Oncology* on ReachMD. On this episode, sponsored by Lilly, we'll hear from Dr. Daniel Persky, Professor of Medicine at the University of Arizona College of Medicine, the Associate Director of Clinical Investigations and Director of Clinical Trial Office in Tucson. He will discuss what he expects to see from the American Society of Hematology 63rd Annual Meeting and Exposition. Here's Dr. Persky now.

#### Dr. Persky:

So, at ASH 2021, in CLL I'm looking forward to, updates on the combination therapy with, BTK inhibitors and BCL-2 inhibitor venetoclax, which are continuing to make their way from relapse setting into the frontline.

For mantle cell lymphoma, I'm anticipating more results on some of the novel agents, as well as on some combination chemoimmunotherapy. So, for example, for mantle cell lymphoma, bispecific anti-CD3 anti-CD20, antibody glofitamab showed excellent response rates, 81 percent or overall response in 67 percent complete response rate. There's also data on PI3 kinase inhibitor parasclisib. With other agents, there was some interesting data on improved progression-free survival with addition of lenalidomide, cerebral-modulating agent, used as maintenance, in combination with rituximab, versus rituximab alone. And there continues to be some data in corporational cytarabine for transplant eligible patients with mantle cell lymphoma.

I think we're going to hear a little bit more about the combinations of small molecules. So, for example, it's going to be zanubrutinib in combination with venetoclax study SEQUOIA, which is in treatment naïve patients with CLL/SLL, and deletion 17p. So those results look quite favorable with, excellent response rates. Then there was the update for the cohort of phase 2 CAPTIVATE study, which was ibrutinib/venetoclax, continues to show no difference with ibrutinib maintenance and excellent MRD negativity that's being maintained.

I believe there's also a study comparing some of this venetoclax time-limited therapy which is still very relevant as we're looking for ways to minimize the duration of therapy with new small molecule inhibitors. And the comparison to chemotherapy-based approaches continues to heavily favor the novel agents.

The need for using monoclonal, CD-20 targeted therapy is still out there. So, to be frank, I don't think there is anything earth-shattering in this, at least for CLL. There's actually a lot more impact for aggressive lymphomas like diffuse large B-cell lymphoma. But it basically extends what we're, kind of, anticipating and continuing to show excellent outcomes for the BTK inhibitor venetoclax doublets.

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