

Tisagenlecleucel (reassessment after the deadline: B-cell acute lymphoblastic leukaemia (ALL), relapsed/ refractory, $0 \le 25$ years)

Resolution of: 15 February 2024 valid until: unlimited

Entry into force on: 15 February 2024 Federal Gazette, BAnz AT 28 03 2024 B6

Therapeutic indication (according to the marketing authorisation of 23 August 2018):

Kymriah is indicated for the treatment of paediatric and young adult patients up to and including 25 years of age with B-cell acute lymphoblastic leukaemia (ALL) that is refractory, in relapse post-transplant or in second or later relapse.

Therapeutic indication of the resolution (resolution of 15 February 2024):

See therapeutic indication according to marketing authorisation.

1. Extent of the additional benefit and significance of the evidence

Tisagenlecleucel is approved as a medicinal product for the treatment of rare diseases in accordance with Regulation (EC) No. 141/2000 of the European Parliament and the Council of 16 December 1999 on orphan drugs. In accordance with Section 35a, paragraph 1, sentence 11, 1st half of the sentence SGB V, the additional medical benefit is considered to be proven through the grant of the marketing authorisation.

The Federal Joint Committee (G-BA) determines the extent of the additional benefit for the number of patients and patient groups for which there is a therapeutically significant additional benefit in accordance with Chapter 5 Section 12, paragraph 1, number 1, sentence 2 of its Rules of Procedure (VerfO) in conjunction with Section 5, paragraph 8 AM-NutzenV, indicating the significance of the evidence. This quantification of the additional benefit is based on the criteria laid out in Chapter 5 Section 5, paragraph 7, numbers 1 to 4 of the Rules of Procedure (VerfO).

<u>Children</u>, adolescents and young adults up to and including 25 years of age with B-cell acute <u>lymphoblastic leukaemia</u> (ALL) that is refractory, in relapse post-transplant or in second or later relapse

Extent of the additional benefit and significance of the evidence of tisagenlecleucel:

Hint for a non-quantifiable additional benefit since the scientific data does not allow quantification

Study results according to endpoints:1

<u>Children</u>, adolescents and young adults up to and including 25 years of age with B-cell acute <u>lymphoblastic leukaemia</u> (ALL) that is refractory, in relapse post-transplant or in second or <u>later relapse</u>

Summary of results for relevant clinical endpoints

Endpoint category	Direction of effect/ risk of bias	Summary
Mortality	n.a.	The data are not assessable.
Morbidity	n.a.	The data are not assessable.
Health-related quality of life	n.a.	The data are not assessable.
Side effects	n.a.	The data are not assessable.

Explanations:

↑: statistically significant and relevant positive effect with low/unclear reliability of data

↓: statistically significant and relevant negative effect with low/unclear reliability of data

↑↑: statistically significant and relevant positive effect with high reliability of data

 $\downarrow \downarrow$: statistically significant and relevant negative effect with high reliability of data

∅: No data available.n.a.: not assessable

• **ELIANA study:** single-arm, multicentre, phase II study, data cut-off from 17 November 2022

- ENSIGN study: single-arm, multicentre, phase II study, data cut-off from 24 May 2019
- **B2001X study:** single-arm, multicentre, phase IIIb study, data cut-off from 13 October 2020
- Long-term follow-up study (LTFU A2205B): All patients who have received CAR-T therapy under a treatment protocol of the pharmaceutical company as part of a clinical trial or a managed access programme (in this case, patients from the ELIANA, ENSIGN and B2001X studies), data cut-off from 3 May 2022

¹ Data from the dossier assessment of the G-BA (published on 1. Dezember 2023), and from the amendment to the dossier assessment from 26 January 2024, unless otherwise indicated.

Mortality

Endpoint		ELIANA (+ LTFU)		ENSIGN (+ LTFU)	В	B2001X (+ LTFU) ^{b)}		
	N	Median survival time in months ^{a)} [95% CI]	N	Median survival time in months ^{a)} [95% CI]	N	Median survival time in months ^{a)} [95% CI]		
		Patients with event n (%)		Patients with event n (%)		Patients with event n (%)		
Overall survi	val							
	98	47.6 [19.4; n.r.] 50 (51)	75	28.5 [10.2; n.r.] 41 (54.7)	74	54.7 [38.8; n.r.] 28 (37.8)		
		Kaplan-Meier estimator [95% CI]		Kaplan-Meier estimator [95% CI]		Kaplan-Meier estimator [95% CI]		
At study month 6	98	77.2 [67.5; 84.4]	75	78.7 [67.1; 86.5]	74	87.5 [77.3; 93.3]		
At study month 12	98	69.9 [59.6; 78.0]	75	59.9 [47.4; 70.3]	74	78.5 [66.9; 86.5]		
At study month 24	98	58.0 [47.4; 67.2]	75	75 55.8 [43.4; 66.5]		68.7 [56.0; 78.4]		
At study month 36	98	52.3 [41.7; 61.8]	75	43.5 [31.5; 54.8]	74	63.8 [50.9; 74.2]		
At study month 48	98	48.8 [38.2; 58.5]	75	75 40.2 [28.5; 51.6]		-		
At study month 60	98	46.3 [35.8; 56.1]	75	40.2 [28.5; 51.6]	74	-		

Morbidity

Endpoint		ELIANA		ENSIGN	B2001X		
	N	Remission rate [95% CI] ^{c)}		N Remission rate [95% CI] ^{c)}		Remission rate [95% CI] ^{c)}	
		Patients with event n	Patients with event n			Patients with event n	
Response (CI	R/CRi;	presented additionally) ^{d)}					
Total	98	68.4 [58.2; 77.4] 67 (68.4)	75	60.0 [48.0; 71.1] 45 (60.0)	74	77.0 [65.8; 86] 57 (77.0)	
CR	98	- 55 (56.1)	75	- 38 (50.7)		74 - 39 (52.7)	
CRi	98	- 12 (12.2)	75	- 7 (9.3)	74	- 18 (24.3)	

Endpoint		ELIANA		ENSIGN		B2001X			
	N	Remission rate [95% CI] ^{c)}	N	Remission rate [95% CI] ^{c)}	N	Remission rate [95% CI] ^{c)}			
		Patients with event n		Patients with event n		Patients with event n			
MRD remissi	on (pr	esented additionally) ^{e)}							
	98	67.3 [57.1; 76.5] 66 (67.3)		57.3 [54.3; 78.4] 43 (57.3)	74	40.5 [29.3; 52.6] 30 (40.5)			
	ELIANA (+ LTFU)		ENSIGN (+ LTFU)		В	32001X (+ LTFU)			
	N	Median time in months ^{a)} [95% CI]		Median time in months ^{a)} [95% CI]	N	Median time in months ^{a)} [95% CI]			
		Patients with event n (%)		Patients with event n (%)		Patients with event n (%)			
Recurrence-f	ree su	rvival ^{f)}							
	80	46.8 [17.8; n.r.] 26 (38.8)	64	n.r. [14.8; n.r.] 16 (35.6)	69	51.4 [24.0; n.r.] 23 (40.4)			
EQ-5D VASg)	EQ-5D VAS ^{g)}								
No usable da	ta avai	lable			_				

Health-related quality of life

PedsQLg)

No usable data available

Side effects

Endpoint	Chemotherapy Lymphocyte depletion			genlecleucel infusion Intil study week 8	Study week 9 to study month 12			
	N	Patients with event n (%)	N Patients with event n (%)		N	Patients with event n (%)		
Total adverse events (presented additionally)								
ELIANA	78	62 (79.5)	80	79 (98.8)	75	69 (92.0)		
ENSIGN	61	51 (83.6)	64	63 (98.4)	56	46 (82.1)		
B2001X	63	45 (71.4)	69	69 (100)	60	48 (80.0)		
Serious adverse	events	(SAE)			•			
ELIANA	78	8 (10.3)	80	54 (67.5)	75	23 (30.7)		

Endpoint		Chemotherapy phocyte depletion		genlecleucel infusion ntil study week 8	Stı	udy week 9 to study month 12	
	N	Patients with event n (%)	N	Patients with event n (%)	N	Patients with event n (%)	
ENSIGN	61	9 (14.8)	64	46 (71.9)	56	21 (37.5)	
B2001X	63	10 (15.9)	69	39 (56.5)	60	19 (31.7)	
Severe adverse events (CTCAE grade 3/4)h)							
ELIANA	78	30 (38.4)	80 67 (83.8)		75	36 (48.0)	
ENSIGN	61	38 (62.3)	64	54 (84.4)	56	26 (46.4)	
B2001X	63	27 (42.8)	69	50 (72.5)	60	27 (45.0)	
Therapy discont	inuatio	on due to adverse ev	ents				
ELIANA	78	1 (1.2) ⁱ⁾	80	n.r.	75	n.r.	
ENSIGN	61	0	64	n.r.	56	n.r.	
B2001X	63	0	69	n.r.	60	n.r.	
Severe adverse	events	according to MedDR	RA (inc	idence ≥ 5% at SOC le	vel)		
Blood and lymph	natic s	ystem disorders					
ELIANA	78	11 (14.1)	80	39 (48.8)	75	10 (13.3)	
ENSIGN	61	18 (29.5)	64	38 (59.4)	56	7 (12.5)	
B2001X	63	11 (17.5)	69	22 (31.8)	60	7 (11.7)	
Cardiac disorder	S						
ELIANA	78	-	80	8 (10.0)	75	-	
ENSIGN	61	-	64	-	56	-	
B2001X	63	-	69	-	60	-	
Gastrointestinal	disorc	lers					
ELIANA	78	-	80	14 (17.6)	75	-	
ENSIGN	61	-	64	11 (17.2)	56	4 (7.1)	
B2001X	63	-	69	5 (7.2)	60	-	
General disorde	rs and	administration site o	onditi	ons			
ELIANA	78	-	80	11 (13.8)	75	-	
ENSIGN	61	-	64	10 (15.7)	56		
B2001X	63	-	69	8 (11.5)	60	-	
Hepatobiliary di	sorder	s					
ELIANA	78	-	80	6 (7.6)	75	-	
ENSIGN	61	-	64	-	56	-	

Endpoint		Chemotherapy phocyte depletion		genlecleucel infusion ntil study week 8	Study week 9 to study month 12		
	N	Patients with event n (%)	N	Patients with event n (%)	N	Patients with event n (%)	
B2001X	63	-	69	-	60	-	
Immune system	disord	lers					
ELIANA	78	-	80	43 (53.8)	75	4 (5.3)	
ENSIGN	61	-	64	22 (34.4)	56	-	
B2001X	63	-	69	23 (33.3)	60	-	
Infections and in	festat	ions					
ELIANA	78	5 (6.4)	80	19 (23.8)	75	20 (26.7)	
ENSIGN	61	4 (6.5)	64	7 (10.9)	56	12 (21.5)	
B2001X	63	5 (7.9)	69	11 (15.9)	60	14 (23.4)	
Investigations							
ELIANA	78	18 (23.0)	80	45 (56.3)	75	16 (21.4)	
ENSIGN	61	26 (42.6)	64	44 (68.7)		12 (21.4)	
B2001X	63	14 (22.2)	69	25 (36.2)	60	10 (16.6)	
Metabolism and	nutrit	ion disorders					
ELIANA	78	4 (5.1)	80	29 (36.3)	75	7 (9.3)	
ENSIGN	61	8 (13.1)	64	24 (37.5)	56	4 (7.1)	
B2001X	63	-	69	11 (15.9)	60	-	
Musculoskeletal	and c	onnective tissue diso	rders				
ELIANA	78	-	80	5 (6.3)	75	-	
ENSIGN	61	-	64	-	56	-	
B2001X	63	-	69	-	60	-	
Nervous system	disord	lers					
ELIANA	78	-	80	10 (12.5)	75	-	
ENSIGN	61	-	64	5 (7.9)	56	-	
B2001X	63	-	69	7 (10.1)	60	-	
Psychiatric disord	ders						
ELIANA	78	-	80	6 (7.5)	75	-	
ENSIGN	61	-	64	-	56	-	
B2001X	63	-	69	-	60	-	

Endpoint		Chemotherapy phocyte depletion		genlecleucel infusion ntil study week 8	Study week 9 to study month 12				
	N	Patients with event n (%)	N	Patients with event n (%)	N	Patients with event n (%)			
Renal and urinary disorders									
ELIANA	78	-	80	9 (11.3)	75	-			
ENSIGN	61	-	64	7 (10.9)	56	-			
B2001X	63	-	69	-	60	-			
Respiratory, tho	racic a	nd mediastinal disord	lers						
ELIANA	78	-	80	23 (28.8)	75	6 (8.0)			
ENSIGN	61	4 (6.6)	64	12 (18.8)	56	3 (5.4)			
B2001X	63	-	69	6 (8.6)	60	-			
Vascular disorde	rs								
ELIANA	78	-	80	17 (21.3)	75	5 (6.7)			
ENSIGN	61	4 (6.6)	64	16 (25.0)		-			
B2001X	63	-	69	7 (10.1)	60	-			
SAEs according t	o Med	IDRA (incidence ≥ 5%	at SO	C level)					
Blood and lympl	natic s	ystem disorders							
ELIANA	78	-	80	16 (20.0)	75	4 (5.3)			
ENSIGN	61	7 (11.5)	64	23 (35.9)	56	5 (8.9)			
B2001X	63	-	69	-	60	-			
Cardiac disorder	s								
ELIANA	78	-	80	5 (6.3)	75	-			
ENSIGN	61	-	64	-	56	-			
B2001X	63	-	69	-	60	-			
Gastrointestinal	disord	lers							
ELIANA	78	-	80	5 (6.3)	75	5 (6.7)			
ENSIGN	61	-	64	5 (7.8)	56	-			
B2001X	63	-	69	-	60	-			
General disorde	rs and	administration site of	onditi	ons					
ELIANA	78	-	80	5 (6.3)	75	-			
ENSIGN	61	-	64	4 (6.3)	56	5 (8.9)			
B2001X	63	5 (7.9)	69	7 (10.1)	60	6 (10.0)			

Endpoint	Lyn	Chemotherapy nphocyte depletion	Tis	agenlecleucel infusion until study week 8	Sti	Study week 9 to study month 12		
	N	Patients with event n (%)	N	Patients with event n (%)	N	Patients with event n (%)		
Immune syste	m dis	orders ^{j)}						
ELIANA	78	-	80	50 (62.5)	75	-		
ENSIGN	61	-	64	41 (64.1)	56	-		
B2001X	63	-	69	28 (40.6)	60	-		
Infections and	infes	tations						
ELIANA	78	-	80	11 (13.8)	75	16 (21.3)		
ENSIGN	61	-	64	9 (14.1)	56	12 (21.4)		
B2001X	63	4 (6.3)	69	-	60	13 (21.7)		
Metabolism ar	nd nu	trition disorders						
ELIANA	78	-	80	4 (5.0)	75	-		
ENSIGN	61	-	64	3 (4.7)	56	-		
B2001X	63	-	69	-	60	-		
Musculoskelet	al and	d connective tissue di	sorde	rs				
ELIANA	78	-	80	-	75	-		
ENSIGN	61	-	64	-	56	3 (5.4)		
B2001X	63	-	69	-	60	-		
Nervous system	n disc	orders						
ELIANA	78	-	80	5 (6.3)	75	-		
ENSIGN	61	-	64	9 (14.1)	56	-		
B2001X	63	-	69	-	60	-		
Renal and urin	ary di	isorders						
ELIANA	78	-	80	5 (6.3)	75	-		
ENSIGN	61	-	64	4 (6.3)	56	-		
B2001X	63	-	69	-	60	-		
Respiratory, th	oraci	c and mediastinal dis	orders	5				
ELIANA	78	-	80	10 (12.5)	75	6 (8.0)		
ENSIGN	61	-	64	8 (12.5)	56	-		
B2001X	63	-	69	-	60	-		
Vascular disea	ses							
ELIANA	78	-	80	8 (10.0)	75	-		

Endpoint	Lyn	Chemotherapy nphocyte deplet	tion		Tisagenlecleucel infusion until study week 8				•	eek 9 to study onth 12
	N	Patients with e n (%)	vent	N	Patients with event n (%)		N	Patients with event n (%)		
ENSIGN	61	-		64	8	3 (12.	.5)	56		-
B2001X	63	-		69		-		60		-
Neoplasms b	enign,	malignant and	unsp	ecified	(includin	g cys	ts and poly	ps)		
B2001X	63	-		69		-		60		3 (5.0)
Endpoint	iı	agenlecleucel nfusion until tudy week 8		•	eek 9 to onth 12		dy month : udy month		Froi	m study month 60 (LTFU)
	N	Patients with event n (%)	N		nts with nt n (%)	N	Patients event n		N	Patients with event n (%)
AEs of specia	linter	est								
Cytokine rele	ase sy	ndrome								
ELIANA	80	61 (76.3)	75	C	0 (0)		1 (2.0)		30	0 (0)
ENSIGN	64	50 (78.1)	56	C	0 (0)		0 (0)		14	0 (0)
B2001X	69	46 (66.7)	60	1	(1.7)	40	0 (0)		40	0 (0)
Haematopoie	etic cyt	openias								
ELIANA	80	53 (66.3)	75	26	(34.7)	50	7 (14.0)		30	0 (0)
ENSIGN	64	27 (42.2)	56	C	0) (0)	32	0 (0)		14	0 (0)
B2001X	69	0 (0)	60	C	0 (0)	40	0 (0)		40	0 (0)
Infections										
ELIANA	80	35 (43.8)	75	40	(53.3)	50	23 (46.	0)	30	3 (10)
ENSIGN	64	26 (40.6)	56	33	(58.9)	32	11 (34.	4)	14	2 (14.3)
B2001X	69	26 (37.7)	60	35	(58.3)	40	8 (16.0	O)	40	9 (22.5)
Prolonged B-	cell de	pletion or agam	mag	lobulir	naemia	T				
ELIANA	80	37 (46.3)	75	15	(20.0)	50	4 (8.0)	30	0 (0)
ENSIGN	64	27 (42.2)	56	8 ((14.3)	32	1 (3.1)	14	2 (14.3)
B2001X	69	21 (30.4)	60	7 ((11.7)	40	3 (6.0)	40	0 (0)
Serious neuro	ologic	events		T						
ELIANA	80	31 (38.8)	75	5	(6.7)	50	2 (4.0)	30	0 (0)
ENSIGN	64	19 (29.7)	56	2	(3.6)	32	2 (6.3)	14	0 (0)

Endpoint	ir	agenlecleucel nfusion until tudy week 8		udy week 9 to udy month 12		dy month 12 to udy month 60	From study month 60 (LTFU)	
	Z	Patients with event n (%)	N	Patients with event n (%)	Z	Patients with event n (%)	N	Patients with event n (%)
B2001X	69	17 (24.6)	60	2 (3.3)	40	2 (4.0)	40	0 (0)
Tumour lysis sy	ndro	ome						
ELIANA	80	4 (5.0)	75	1 (1.3)	50	0 (0)	30	0 (0)
ENSIGN	64	1 (1.6)	56	1 (1.8)	32	0 (0)	14	0 (0)
B2001X	69	1 (1.4)	60	0 (0)	40	0 (0)	40	0 (0)
Recurrence or	exace	erbation of an a	utoir	nmune disease				
ELIANA	80	35 (43.8)	75	15 (20.0)	50	5 (10.0)	30	0 (0)
ENSIGN	64	1 (1.6)	56	3 (5.4)	32	1 (3.1)	14	0 (0)
B2001X					-			
Exacerbation o	f the	graft-versus-ho	st re	sponse				
ELIANA	80	0 (0)	75	2 (2.7)	50	2 (4.0)	30	0 (0)
ENSIGN	64	1 (1.6)	56	3 (5.4)	32	0 (0)	14	0 (0)
B2001X					-			
Secondary mal	ignar	ncies						
ELIANA	80	0 (0)	75	1 (1.3)	50	0 (0)	30	0 (0)
ENSIGN	64	0 (0)	56	2 (3.6)	32	1 (3.1)	14	0 (0)
B2001X					-			
Cerebral oeder	na							
ELIANA	80	0 (0)	75	0 (0)	50	0 (0)	30	0 (0)
ENSIGN	64	1 (1.6)	56	0 (0)	32	0 (0)	14	0 (0)
B2001X					-			

- a. Percentiles with 95% CI were calculated using PROC LIFETEST according to the method of Brookmeyer and Crowley (1982).
- b. Since the primary follow-up phase of the B2001X study is 12 months post infusion, the data cut-off from 13 October 2020 was not presented. Only the LTFU data cut-off from 3 May 2022 is shown.
- c. Data according to the exact Clopper-Pearson method.
- d. Primary endpoint of the ELIANA and ENSIGN studies; assessment by the Independent Review Committee (IRC)
- e. The MRD remission was estimated by IRC. The reference value is all patients who achieved a CR/CRi within 6 months according to the IRC.
- f. The response was estimated by IRC. According to the study report, all recurrences that were categorised as an event were confirmed by the IRC. The reference value is all patients who achieved a CR/CRi within 6 months according to the IRC. Evaluations with censoring at the time of allogeneic stem cell transplantation and taking into account the data of the long-term follow-up study A2205B. The reliability of data of the effect estimator for the B2001X study is limited due to the small number of subjects with a correspondingly long observation period at the time the median was reached.

- g. Return rate < 70%
- h. The pharmaceutical company presents adverse events for CTCAE grades 3 and 4 separately. The joint presentation of CTCAE grades 3/4 is based on own calculation.
- i. Enrolled set
- j. PT Cytokine release syndrome

Abbreviations used:

AD = absolute difference; CR = complete remission; CRi = complete remission with incomplete haematologic recovery; CTCAE = Common Terminology Criteria for Adverse Events; HR = hazard ratio; IRC = Independent Review Committee; CI = confidence interval; KM = Kaplan-Meier; LTFU = long-term follow-up; N = number of patients evaluated; n = number of patients with (at least one) event; n.c. = not calculable; n.r. = not reached; n.r. = not relevant; MRD = minimal residual disease; vs = versus

2. Number of patients or demarcation of patient groups eligible for treatment

<u>Children</u>, adolescents and young adults up to and including 25 years of age with B-cell acute <u>lymphoblastic leukaemia (ALL)</u> that is refractory, in relapse post-transplant or in second or later relapse

approx. 40 – 90 patients

3. Requirements for a quality-assured application

The requirements in the product information are to be taken into account. The European Medicines Agency (EMA) provides the contents of the product information (summary of product characteristics, SmPC) for Kymriah (active ingredient: tisagenlecleucel) at the following publicly accessible link (last access: 5 January 2024):

https://www.ema.europa.eu/en/documents/product-information/kymriah-epar-product-information en.pdf

In accordance with the European Medicines Agency (EMA) requirements regarding additional risk minimisation measures, the pharmaceutical company must provide training material and a patient emergency card. Training material for all healthcare professionals who will prescribe, dispense, and administer tisagenlecleucel includes instructions for identifying, treating, and monitoring cytokine release syndrome and neurological side effects. It also includes instructions on the cell thawing process, availability of tocilizumab at the point of treatment, provision of relevant information to patients, and full and appropriate reporting of side effects.

The patient training programme should explain the risks of cytokine release syndrome and serious neurologic side effects, the need to report symptoms immediately to the treating physician, to remain close to the treatment facility for at least 4 weeks after infusion of tisagenlecleucel, and to carry the patient emergency card at all times.

Tisagenlecleucel must be used in a qualified treatment facility. For the infusion of tisagenlecleucel in the present therapeutic indication, the quality assurance measures for the use of CAR-T cells in B-cell neoplasms apply (ATMP Quality Assurance Guideline, Annex 1).

4. Treatment costs

Annual treatment costs:

<u>Children</u>, adolescents and young adults up to and including 25 years of age with B-cell acute lymphoblastic leukaemia (ALL) that is refractory, in relapse post-transplant or in second or later relapse

Designation of the therapy	Annual treatment costs/ patient			
Medicinal product to be assessed:				
Tisagenlecleucel	€ 239,000			
Additionally required SHI services	€ 505.87 - € 966.97			

Costs after deduction of statutory rebates (LAUER-TAXE®) as last revised: 15 January 2024)

Other SHI services:

Designation of the therapy	Type of service	Costs/ unit	Number/ cycle	Number/ patient/ year	Costs/ patient/ year		
Medicinal product to be assessed							
Tisagenlecleucel: Lymphocyte depletion							
Cyclophosphamide	Surcharge for production of a parenteral solution containing cytostatic agents	€ 100	2	2.0	€ 200		
Fludarabine	Surcharge for production of a parenteral solution containing cytostatic agents	€ 100	4	4.0	€ 400		

Designation of medicinal products with new active ingredients according to Section 35a, paragraph 3, sentence 4 SGB V that can be used in a combination therapy with the assessed medicinal product

In the context of the designation of medicinal products with new active ingredients pursuant to Section 35a, paragraph 3, sentence 4 SGB V, the following findings are made:

<u>Children, adolescents and young adults up to and including 25 years of age with B-cell acute lymphoblastic leukaemia (ALL) that is refractory, in relapse post-transplant or in second or later relapse</u>

 No medicinal product with new active ingredients that can be used in a combination therapy and fulfils the requirements of Section 35a, paragraph 3, sentence 4 SGB V.

The designation of combinations exclusively serves the implementation of the combination discount according to Section 130e SGB V between health insurance funds and pharmaceutical companies. The findings made neither restrict the scope of treatment required to fulfil the medical treatment mandate, nor do they make statements about expediency or economic feasibility.