

Canadian Chronic Lymphocytic Leukemia (CLL) Patient Options



STARTING FIRST-LINE TREATMENT

Many people with CLL & SLL do not require treatment right away and some people never require treatment. If the cancer is Rai stage 0, I, II, or III, your doctor will assess if treatment is needed now.

The decision to start treatment depends on whether you have signs or symptoms that are associated with progressive disease. Together, these signs and symptoms are called treatment indications.

Treatment is started only if you have at least one of the **treatment indications** listed here:

<https://www.lymphoma.ca/lymphoma/ctl-sll/treatment>

Before starting first-line treatment, your doctor may want to test the cancer again.

IMPORTANT MARKERS TO TEST ARE:

1. Del(17p)
2. TP53 mutation
3. IGHV mutation

LEARN MORE ABOUT MOLECULAR TESTING BY VISITING OUR WEBSITE AT:

<https://www.lymphoma.ca/lymphoma/ctl-sll/diagnosis/lab-tests/molecular-testing/>

When deciding on treatment, your doctor will take into account a number of factors, including your age, overall health, molecular markers and your preferences.

Treatment options are listed below. Note that not all options are funded in every province and the funding criteria may vary. It is important for you and your doctor to discuss the best available option for you.

FRONT-LINE TREATMENT OPTIONS

1. FIT PATIENTS WITHOUT DEL17P OR TP53 MUTATION

What are the options?

Fludarabine + cyclophosphamide + rituximab (mutated IGHV)

Acalabrutinib (unmutated IGHV)

Venetoclax + Obinutuzumab *rarely available for this indication*

Clinical trial

2. UNFIT PATIENTS WITHOUT DEL17P OR TP53 MUTATION

What are the options?
Venetoclax + Obinutuzumab (mutated, unmutated IGHV)
Chemo-immunotherapy (mutated IGHV)
Acalabrutinib (unmutated IGHV)
Clinical trial

3. ALL PATIENTS WITH DEL17P OR TP53 MUTATION

What are the options?
Acalabrutinib, Ibrutinib
Venetoclax + Obinutuzimab
Clinical trial

TREATMENT OF RELAPSED/REFRACTORY CLL

If your CLL returns after treatment, does not respond to treatment, or progresses while you are on treatment (for those receiving indefinite treatment with an oral targeted therapy), there are many treatment options available.

When deciding on treatment, your doctor will take into account a number of factors, including your age, overall health, molecular markers and previous therapies used to treat your CLL.

In some cases, you may be retreated with the same therapy previously used to treat your CLL.

Before starting your next round of treatment, your doctor may want to test the cancer again.

IMPORTANT MARKERS TO TEST ARE:

1. Del(17p)
2. TP53 mutation
3. IGHV mutation (if not previously tested)

LEARN MORE ABOUT MOLECULAR TESTING BY VISTING OUR WEBSITE AT:
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RELAPSED/REFRACTORY TREATMENT OPTIONS

1. PATIENTS WITHOUT DEL17P OR TP53 MUTATION

What are the options?
Venetoclax with or without rituximab
Ibrutinib
Idelalisib + rituximab
Chemoimmunotherapy (e.g. FCR, BR or ClbOb)
Clinical trial

2. PATIENTS WITH DEL17P OR TP53 MUTATION

What are the options?
Venetoclax with or without rituximab
Ibrutinib
Idelalisib + rituximab
Allogeneic stem cell transplant
Clinical trial