Brukinsa® (zanubrutinib) – New indication

- On January 19, 2023, BeiGene announced the FDA approval of Brukinsa (zanubrutinib), for the treatment of adult patients with chronic lymphocytic leukemia (CLL) or small lymphocytic lymphoma (SLL).

- Brukinsa is also approved for the treatment of mantle cell lymphoma, Waldenström's macroglobulinemia, and marginal zone lymphoma.

- The approval of Brukinsa for the new indication was based on two randomized trials (SEQUOIA and ALPINE). SEQUOIA was an open-label study in patients with previously untreated CLL/SLL. Patients without 17p deletion (17p del) were randomized to receive either Brukinsa until disease progression or unacceptable toxicity (n = 241) or bendamustine plus rituximab (BR) for 6 cycles (n = 238). Additionally, the same Brukinsa regimen was evaluated in 110 patients with previously untreated, 17p del CLL/SLL in a non-randomized cohort. Efficacy was based on progression-free survival (PFS) in the randomized cohort and overall response rate (ORR) and duration of response (DOR) in the single-arm cohort.

    - In the randomized cohort, median PFS was not estimable for the Brukinsa arm vs. 33.7 months for the BR treatment arm (hazard ratio 0.42, 95% CI: 0.28, 0.63; $p < 0.0001$). The ORR was 93% (95% CI: 89, 96) for the Brukinsa arm vs. 85% (95% CI: 80, 90) for the BR arm. At the time of analysis, overall survival (OS) data were immature.
    - In the single-arm cohort, the ORR was 88% (95% CI: 81, 94). The median DOR was not estimable.

- ALPINE was a randomized, open-label, actively controlled study in 652 patients with relapsed or refractory CLL/SLL. Patients were randomized to receive either Brukinsa or Imbruvica® (ibrutinib), each administered until disease progression or unacceptable toxicity. Efficacy was based on ORR and DOR.

    - The ORR was 80% and 73% for Brukinsa and Imbruvica, respectively (response rate ratio 1.10, 95% CI: 1.01, 1.20; $p = 0.0264$).
    - The median DOR was not estimable for either treatment arm.
    - At the time of analysis, OS data were immature.

- The recommended dosage of Brukinsa for all its uses is 160 mg taken orally twice daily or 320 mg taken orally once daily until disease progression or unacceptable toxicity.