

Plain English Summary

Treatments for mantle cell lymphoma

What does the guidance say?

Bortezomib is recommended for listing on the Standard Drug List (SDL) for government funding for previously untreated and relapsed or refractory mantle cell lymphoma (MCL).

Acalabrutinib and zanubrutinib are recommended for listing on the Medication Assistance Fund (MAF) for government funding for patients with relapsed or refractory MCL who have had a least one previous treatment.

Ibrutinib is not recommended for subsidy for MCL.

What is mantle cell lymphoma?

Mantle cell lymphoma (MCL) is a rare type of B-cell non-Hodgkin lymphoma which occurs when abnormal white blood cells (B-lymphocytes) grow uncontrollably and form tumours in a part of the lymph node called the mantle zone. Symptoms of MCL can include enlarged, painless lymph nodes in the neck, armpit or groin, weight loss, heavy sweating in the night and unexplained itching.

If symptoms improve with treatment but then come back, this is called relapsed disease. If symptoms do not improve with treatment, this is called refractory disease.

What are acalabrutinib and zanubrutinib?

Acalabrutinib and zanubrutinib belong to a group of targeted medicines called Bruton's tyrosine kinase (BTK) inhibitors which bind to BTK proteins on cancer cells and stop them from growing. Both treatments are taken orally each day.

Your doctor will tell you how much you need to take and how long you need to take either of these treatments for.

What is bortezomib?

Bortezomib belongs to a group of medicines called proteasome inhibitors which can cause proteins to build up and kill cancer cells.

It is given as an injection under your skin or intravenously (IV) as a slow drip into a vein in your arm, either on its own or in combination with other cancer drugs. Your doctor will tell you how often you need to receive treatment.

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Who can have acalabrutinib, bortezomib or zanubrutinib?

Patients with mantle cell lymphoma who have had a least one previous treatment, but the cancer has come back or worsened can have acalabrutinib or zanubrutinib.

Patients with mantle cell lymphoma who have not had treatment before, or who have had at least one previous treatment can have bortezomib.

Your doctor can advise if any of these treatments are suitable for you.

Why were these treatments recommended for funding?

ACE evaluates how well a treatment works in relation to how much it costs compared to other treatments. Acalabrutinib, bortezomib and zanubrutinib were recommended for funding because their benefit in improving survival for certain patients with mantle cell lymphoma justifies their costs.

Ibrutinib was not recommended for subsidy because its benefit does not justify its cost. If you need ibrutinib for MCL, you can speak to a medical social worker to find out if there is other financial assistance available to help with the cost of treatment.

What does listing on SDL or MAF mean for me?

Bortezomib has been listed on the Standard Drug List (SDL). Drugs on SDL are subsidised at 50% for all Singaporean citizens who are treated in a public healthcare institution. Patients from lower to middle income households may receive up to 75% subsidy.

Acalabrutinib and zanubrutinib have been listed on the Medication Assistance Fund (MAF). The MAF helps people pay for expensive treatments that are clinically effective and cost effective. If your doctor prescribes acalabrutinib or zanubrutinib for you, and you meet the MAF criteria, your treatment cost will be subsidised by 40% to 75%.

All three drugs have also been included on the Cancer Drug List (CDL) and are claimable under MediShield Life. The subsidy class and MediShield Life claim limits are available at go.gov.sg/moh-cancer-drug-list.

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