

# Why CALQUENCE<sup>®</sup> is a preferred & more tolerable option for your patients?



## Results from head-to-head study vs ibrutinib in relapsed or refractory CLL/SLL patients

**Comparable efficacy** with ibrutinib<sup>1</sup>




**Lower discontinuation rate** due to adverse events<sup>1</sup>  
(CALQUENCE<sup>®</sup>: 14.7% vs ibrutinib 21.3%)

**Significant lower incidence** of any grade atrial fibrillation/ flutter  
(CALQUENCE<sup>®</sup>: 9.4% vs ibrutinib: 16%,  $P=0.02$ )<sup>1</sup> with 0 incidence of ventricular arrhythmias

**Reduced incidence** of any grade hypertension (CALQUENCE<sup>®</sup>: 8.6% vs ibrutinib: 22.8%,  $P<0.001$ )<sup>1</sup> and grade  $\geq 3$  hypertension (CALQUENCE<sup>®</sup>: 4.1% vs ibrutinib: 8.7%)<sup>1</sup>

**Better tolerated with lower frequencies** of common AEs, including diarrhea, arthralgia, and bruising (any grade bleeding) events<sup>1</sup> compared to ibrutinib

### HSA Approved Indications

-  In combination with obinutuzumab or as monotherapy for the treatment of patients with previously untreated chronic lymphocytic leukaemia (CLL) / small lymphocytic lymphoma (SLL).
-  As monotherapy for the treatment of patients with CLL/SLL who have received at least one prior therapy.
-  For the treatment of patients with mantle cell lymphoma (MCL) who have received at least one prior therapy.

### CALQUENCE<sup>®</sup> Singapore Abridged Prescribing Information

**CALQUENCE** (Acalabrutinib) 100 mg Hard Capsules. **INDICATIONS:** 1. In combination with obinutuzumab or as monotherapy for the treatment of patients with previously untreated chronic lymphocytic leukaemia (CLL) / small lymphocytic lymphoma (SLL). 2. As monotherapy for the treatment of patients with CLL/SLL who have received at least one prior therapy. 3. For the treatment of patients with mantle cell lymphoma (MCL) who have received at least one prior therapy. **DOSEAGE:** CLL/SLL: 100 mg (1 capsule) twice daily, separated by approximately 12 hours until disease progression or unacceptable toxicity. **CONTRAINDICATIONS:** Hypersensitivity to the active ingredient or to any of the excipients. **PREGNANCY & LACTATION:** CALQUENCE should not be used during pregnancy and women of childbearing potential should be advised to avoid becoming pregnant while receiving CALQUENCE. It is not known whether CALQUENCE is excreted in human milk. Risk to the suckling child cannot be excluded. **WARNINGS & PRECAUTIONS:** CALQUENCE can cause serious, potentially fatal adverse events including haemorrhage and infections. Cytopenias, second primary malignancies and atrial fibrillation were reported in patients treated with CALQUENCE monotherapy. Plasma concentrations of active substances such as CYP3A inhibitors, inducers and substrates, as well as gastric acid reducing medications and BCSF substrates may alter or be altered by CALQUENCE. No dose adjustment is recommended in patients with mild or moderate renal or hepatic impairment. The pharmacokinetics and safety of CALQUENCE in patients with severe renal impairment has not been studied. It is not recommended to administer CALQUENCE in patients with severe hepatic impairment. The safety and efficacy of CALQUENCE in children and adolescents aged less than 18 years have not been established. Please refer to the full prescribing information for important dosage modification and management information specific to adverse reactions and concomitant use. **UNDESIRABLE EFFECTS:** The most common (20%) adverse reactions of any grade were infection, headache, diarrhoea, bruising, musculoskeletal pain, nausea, fatigue and rash. The most common (5%) Grade 3 adverse reactions were infection, neutropenia and anaemia. Full prescribing information is available upon request.

AE: Adverse Event; CLL: Chronic Lymphocytic Leukemia; SLL: Small Lymphocytic Lymphoma

**Reference:** 1. Byrd J, Hillman P, Gada P, et al. Acalabrutinib versus ibrutinib in previously treated chronic lymphocytic leukemia: results of the first phase III trial. *J Clin Oncol*. 2021. DOI: <https://doi.org/10.1200/JCO.21.01210>.