THE BTK INHIBITOR DEMONSTRATED TO PROVIDE COMPLETE AND SUSTAINED INHIBITION2,3
FOR ADULTS WITH PREVIOUSLY TREATED MANTLE CELL LYMPHOMA (MCL)*

24-hour inhibition of BTK was maintained at 100% in PBMCs and 94% to 100% in lymph nodes when taken at the recommended total daily dose of 320 mg. The clinical significance of 100% inhibition has not been established.2,3

*This indication is approved under accelerated approval based on overall response rate. Continued approval for this indication may be contingent upon verification and description of clinical benefit in a confirmatory trial.

**The efficacy of BRUKINSA was assessed in 2 clinical trials that included a total of 118 adult patients with MCL who received at least 1 prior therapy.

Study 206: N=86, Phase 2, open-label, multicenter, single-arm trial; PET scans were required for response assessment. Study 003: N=32, Phase 1/2, open-label, global, multicenter, single-arm trial; PET scans were not required for response assessment and the majority of patients were assessed mostly using CT scans.

‡Median follow-up time for initial analysis was 18.4 months for Study 206 and 18.8 months for Study 003.

§Median follow-up time for long-term analysis was 35.3 months for Study 206.

¶BRUKINSA was allowed to be coadministered in clinical trials with antiplatelets and anticoagulants (as long as INR was ≤1.5 and aPTT ≤1.5 x ULN).

aPTT=activated partial thromboplastin time; BTK=Bruton’s tyrosine kinase; CI=confidence interval; CR=complete response; CT=computed tomography; H2RAs=H2-receptor antagonists; INR=International Normalized Ratio; IRC=independent review committee; ORR=overall response rate; PBMCs=peripheral blood mononuclear cells; PET=positron emission tomography; PPIs=proton pump inhibitors; ULN=upper limit of normal.

No dose adjustments needed with several common medications2,4-6

• Gastric acid reducing agents including PPIs, H2RAs, and antacids
• Anticlotting medications

No dose exchange required for dose modification2

Dose modification for ≥Grade 3 adverse reactions only requires reduction in number of capsules taken daily

2 flexible dosing options2

BRUKINSA® (zanubrutinib) can be taken as 160 mg twice daily or 320 mg once daily

Please see additional Important Safety Information on the next page, and accompanying full Prescribing Information.

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**INDICATION**

BRUKINSA® (zanubrutinib) is a kinase inhibitor indicated for the treatment of adult patients with mantle cell lymphoma (MCL) who have received at least one prior therapy.

This indication is approved under accelerated approval based on overall response rate. Continued approval for this indication may be contingent upon verification and description of clinical benefit in a confirmatory trial.

Please see full Prescribing Information including Patient Information.

**REFERENCES**


