

Idelalisib (Zydelig) for Chronic Lymphocytic Leukemia

pERC Recommendation: Recommends with conditions For further details, please see pERC Final Recommendation

Notification to Implement Issued by pCODR: September 2, 2015

This information is current as of June 4, 2018.

Note: Funding criteria as listed on the decision date. Please refer to the provincial drug programs for the most recent funding criteria and program eligibility.

PROVINCE	STATUS	FUNDING DATE	FUNDING CRITERIA
ВС	Funded	Aug 1, 2017	Relapsed/refractory CLL/SLL who have previously received at least one prior therapy. Symptomatic disease requiring systemic therapy. Not eligible for iBRUtinib, i.e., due to contraindications, side effects profile*. A Compassionate Access Program (CAP) approval is required prior to the initiation of treatment (please refer to https://cap.phsa.ca/) * Patients are eligible to receive either idelalisib with riTUXimab (ULYIDELAR) OR iBRUtinib (ULYIBRU) in the relapsed/refractory setting. ULYIDELAR is not funded as a sequential treatment option for patients who have progressed on iBRUtinib, except as a bridge to allogeneic transplant in patients who have received first-line iBRUtinib for 17p deletion (ULYFIBRU) or high risk disease.
АВ	Funded	Oct 18, 2016	In combination with rituximab for the treatment of patients with relapsed chronic lymphocytic leukemia (CLL). Treatment should continue until unacceptable toxicity or disease progression. Only to be used after progression on iburitinib in 1st line as a bridge to transplant, otherwise not covered after progression on 1st line ibrutinib.



PROVINCE	STATUS	FUNDING DATE	FUNDING CRITERIA
SK	Funded	Aug 8, 2016	In combination with Rituximab for the treatment of patients with relapsed chronic lymphocytic leukemia/small lymphocytic lymphoma (CLL/SLL) - For responding patients receiving Ibrutinib, but who are experiencing toxicity with no disease progression, Idelalisib may be used as monotherapy without requirement for Rituximab - Idelalisib may be continued until unacceptable toxicity or disease progression - Idelalisib is not funded as a sequential treatment option for patients who have progressed on Ibrutinib treatment, except in the clinical setting where Idelalisib with Rituximab may be used as a bridge to allogeneic transplant - Chemotherapy in combination with anti-CD20 therapy is not funded after Idelalisib failure.
MB	Funded	Oct 20, 2016	In combination with rituximab for the treatment of patients with relapsed chronic lymphocytic leukemia (CLL). Treatment should continue until acceptable toxicity or disease progression.
ON	Funded	Oct 19, 2016	For the treatment of patients with relapsed chronic lymphocytic leukemia/small lymphocytic lymphoma in combination with rituximab. Patients whose disease has progressed on ibrutinib therapy in the relapsed setting are not eligible to receive idelalisib. Patients who have experienced intolerance but not disease progression to ibrutinib in the relapsed setting may switch to idelalisib. Documentation on the nature of the intolerance is required.
NS	Funded	May 1, 2017	In combination with rituximab for patients with relapsed chronic lymphocytic leukemia (CLL). Treatment should continue until unacceptable toxicity or disease progression.
NB	Funded	Dec 21, 2016	For the treatment of patients with relapsed chronic lymphocytic leukemia (CLL), in combination with rituximab. Treatment should be discontinued upon disease progression or unacceptable toxicity. Idelalisib will not be reimbursed for patients whose disease has progressed on ibrutinib therapy in the relapsed setting.
NL	Funded	Jan 1, 2017	In combination with rituximab for the treatment of patients with relapsed chronic lymphocytic leukemia (CLL). Treatment should continue until unacceptable toxicity or disease progression.
PEI	Under provincial consideration		



Under provincial consideration means that the province is reviewing pCODR's recommendation. This may include the province working with the drug manufacturer to reach an agreement for a drug product that both parties can accept, in particular in cases where the pCODR Expert Review Committee has recommended that the drug be funded only on the condition of cost-effectiveness being improved to an acceptable level. This may occur before or after the pan-Canadian Pharmaceutical Alliance negotiations. Please contact the specific provincial drug program and/or cancer agency in your province for information about the status of a given drug product.