

## Some good news for liso-cel at last



Jacob Plieth

With US approval at long last for Bristol Myers Squibb’s liso-cel, lymphoma doctors can make a direct comparison of FDA-curated data for the three anti-CD19 Car-T therapies now available. The good news for Bristol is that the agency broadly agrees with the safety and efficacy cited in the [most recent cut of liso-cel’s pivotal Transcend study](#). Thus liso-cel, now branded Breyanzi, has efficacy on a par with Gilead’s Yescarta, with more durable responses and distinctly less cytokine release and neurotoxicity. This at least backs claims made by the product’s originator, Juno, that Breyanzi’s defined 50/50 CD4+/CD8+ T-cell ratio gives a more controllable and safer therapy. This is where the good news ends, however: hospital staff are becoming increasingly expert at handling such toxicities, and a defined-cell product is more expensive to manufacture than one generated from bulk cells. Margins on Car-T therapy are already vanishingly small, and whether Bristol can ever make Breyanzi profitable is a key unknown. And Friday’s approval is cold comfort for funds that had held contingent value rights related to Bristol’s Celgene acquisition: Breyanzi [approval not having come by December 31, 2020](#), the security had already expired.

### Comparison of CD19-directed Car-T therapy for DLBCL

Product	Yescarta	Kymriah	Breyanzi
<b>Company</b>	Gilead	Novartis	BMS
<b>Black box</b>	CRS & neurotox	CRS & neurotox	CRS & neurotox
<b>Patients evaluable</b>	101 (108 for safety)	68 (106 for safety)	192 (268 for safety)
<b>ORR</b>	72% (51% CR)	50% (32% CR)	73% (54% CR)
<b>mDOR</b>	9.2 mth	Not evaluable	16.7 mth
<b>CRS</b>	94% (13% ≥gr3)	74% (23% ≥gr3)	46% (4% ≥gr3)
<b>Neurotoxicity</b>	87% (≥gr3 not given)	58% (18% ≥gr3)	35% (12% ≥gr3)

Source: US product labels.