

New study finds cellular immunotherapy treatment associated with improved quality of life

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Adult lymphoma patients whose disease was effectively treated with chimeric antigen receptor T-cell (CAR-T) therapy showed marked improvement on a variety of self-reported quality of life measures, according to a study published today in *Blood Advances*. The study offers evidence that CAR-T may not only extend cancer patients' survival, but also improve their quality of life after treatment.

Prior to the advent of CAR-T and other forms of cellular immunotherapy, patients with diffuse large B-cell lymphoma (DLBCL) had limited treatment options, and patients with advanced DLBCL had often already exhausted those options. CAR-T therapies—which are developed by gathering a patient's own T cells, engineering them to target proteins specific to the surface of cancer cells, and reintroducing the modified T cells into the patient's [immune system](#) to kill the [cancer cells](#)—show promise for these patients, demonstrating sustained clinical remissions and better survival rates.

Aiming to identify additional patient benefits of CAR-T, researchers in the new study evaluated quality of life in [adult patients](#) with relapsed/refractory DLBCL undergoing treatment with a CAR-T therapy called tisagenlecleucel. Patients were asked to report on their quality of life using two tools: one assessed physical, social, emotional, and functional well-being as well as disease- and treatment-related symptoms, while the other elicited responses relating to physical and

social function, health perception, and mental health. Data were collected prior to treatment, and then again at months 3, 6, 12, and 18 following treatment, unless the patients discontinued participation in the study or their disease progressed.

Out of 108 evaluated patients, 57 achieved a complete or partial response to tisagenlecleucel treatment. Baseline scores on patient-reported quality of life outcomes were similar between the total patient population and those who responded to the therapy, but responsive patients demonstrated continued improvement in quality of life measures over time. Compared to baseline, their most significant improvements were in areas of general health, vitality, physical function, and [social function](#).

"Many patients with this advanced level of disease become depressed and withdraw, but here patients reported improved functional status, physical capabilities, and ability to interact with people," said Richard Maziarz, MD, of Oregon Health & Science University School of Medicine, and the study's lead author. "As we progress in our capacity to offer therapies to treat cancers, we have to ask: is it enough to just have our patients in remission or alive, or do we want them to be able to truly live again, and to re-enter society with full function?"

While CAR-T has shown efficacy, it is a costly therapy. Dr. Maziarz and his team hope the findings about [quality of life](#) improvement will support the value of the [therapy](#). "The high price of health care is in the news daily. Is it worth it? What is the value of our clinical interventions? We want to know that we are not just adding extra days to a patient's life, but that those extra days are meaningful to them."

Provided by American Society of Hematology

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