

## Welcome to the second edition of Nurse News for 2020!

Lymphoma Australia’s Nurse News aims to keep nurses with a special interest in lymphoma up to date with all aspects of lymphoma care locally and from around the world.

The year 2020 has definitely been full of challenges for everyone. Lymphoma Australia have been working hard behind the scenes to ensure that patients, carers and healthcare professionals are kept up to date and informed about the latest in lymphoma and CLL. We continue to advocate for the best treatments to be available for lymphoma patients and due to COVID-19 we have been developing virtual platforms to increase awareness for this cancer.

Lymphoma Australia did have plans to attend the recent European Hematology Association (EHA) congress that is held every June. However, due to COVID-19 restrictions this became a virtual meeting. We have done the next best thing and interviewed some of Australia’s leading lymphoma experts to bring the key presentation highlights to you. See inside for a round-up of the latest research data for lymphoma and CLL.

Lymphoma Australia would also like to introduce you to our newest team member Rebecca Beck,



Behind the scenes in-studio

who is our new Lymphoma Care Nurse in New South Wales. Find out more about Bec inside.

Lymphoma Care Nurses may not be able to educate you in person right now but let us know if we can provide education to you via virtual means. Contact [nurse@lymphoma.org.au](mailto:nurse@lymphoma.org.au) if we can help you.

## Inside

Welcome.....	1
Meet Rebecca Beck .....	2
EHA Congress Updates .....	3
Classical HL – in focus .....	5
Pharmaceutical Updates.....	7
Lymphoma Updates and News .....	8

# Rebecca Beck

## *Lymphoma Care Nurse* - New South Wales

Lymphoma Australia is pleased to introduce you to our newest member of the team Rebecca Beck. Rebecca has joined our Lymphoma Care Nurse team in New South Wales.

Rebecca is based in Sydney and joined Lymphoma Australia in mid-March, just in time for COVID-19 restrictions. The Lymphoma Care Nurses role is to provide support, awareness, advocacy and education for lymphoma or CLL patients, carers and healthcare professionals across NSW. Rebecca will be in contact with NSW cancer centres very soon.

Rebecca is a Registered Nurse with over 20 years of experience in the field of malignant haematology. She gained her degree at the University of Technology, Sydney in 1999 and has gained clinical experience at St George Hospital Sydney and University College Hospital, London. She has worked in multiple roles within Haematology and bone marrow transplant (BMT) including Lymphoma Research Nurse Specialist.

Returning to Australia in 2010 Rebecca worked as a Clinical Nurse Consultant in the Haematology Clinical Research Unit at Royal Prince Alfred Hospital, Sydney. Her most recent role was a Nurse Educator within the pharmaceutical industry before joining us.



Rebecca Beck, Lymphoma Care Nurse - NSW

Rebecca has undertaken further training in Cancer Nursing, Palliative Care and Clinical Research. Rebecca is really looking forward to connecting with nurses and patients to provide support and education on Lymphoma.

Welcome Rebecca! Please contact Rebecca:  
[rebecca.beck@lymphoma.org.au](mailto:rebecca.beck@lymphoma.org.au)

# The 25<sup>th</sup> European Hematology Association (EHA) Congress

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The 25th European Hematology Association (EHA) Congress took place from 11-21 June 2020. Due to the worldwide impact of COVID-19 crisis, the Congress was replaced as a virtual event.

Lymphoma Australia were honoured to have the opportunity to interview some of our expert clinicians in Australia who provided their reviews of papers, research and presentations. They also reflected about how this relates to Australian lymphoma and CLL patients.

We were fortunate to do two studio interviews in Melbourne and the remaining interviews online. They can be watched via the Lymphoma Australia YouTube channel (links below).

- **Aggressive lymphoma updates**

*Dr Michael Dickinson, Peter MacCallum Cancer Centre & Royal Melbourne Hospital*

Key presentations that were provided during EHA Congress that included:

- The emerging group of therapies called bispecific monoclonal antibodies (MAB)
- Dr Dickinson presented the results from CD20-TCB (Glofitamab – a new bispecific MAB) study for relapsed or refractory aggressive B-cell lymphoma that shows great promise

- EHA presentation of the Alexander study – a new bicistronic CAR T-cell therapy
- CAR T-cell therapy Australian update
- Classical Hodgkin lymphoma updates

Watch the full interview on the link below.

 <https://youtu.be/Yvp6psvhFEY>

- **Indolent lymphoma updates**

*Professor John Seymour, Peter MacCallum Cancer Centre & Royal Melbourne Hospital*

Professor Seymour provided an overview of the key presentations provided during EHA Congress and the use of some of the targeted therapies that include:

- BTK inhibitors; venetoclax and other targeted therapies
- Chronic lymphocytic leukaemia (CLL) study updates & novel therapies
- Mantle cell lymphoma & follicular lymphoma updates
- ZUMA-5 study – CAR T-cell in R/R indolent B-cell NHL

Watch the full interview on the link below.

 <https://youtu.be/g0WzrxtrBo>

# The 25<sup>th</sup> European Hematology Association (EHA) Congress

## Lymphoma Australia expert interviews

- **Zanubrutinib for Waldenstrom's macroglobulinemia (WM)**

*Professor Judith Trotman, Concord Hospital (Sydney)*

🔍 <https://youtu.be/6HhG1C7J1X8>

- **Gallium study: Long term follow-up of the prognostic value of PET/CT status in follicular lymphoma**

*Professor Judith Trotman, Concord Hospital (Sydney)*

🔍 <https://youtu.be/jgpbhh5mQqc>

- **Indolent lymphoma updates: WM, mantle cell lymphoma (MCL) & CNS MCL**

*Associate Professor Chan Cheah, Sir Charles Gairdner Hospital & Hollywood Private Hospital (Perth)*

🔍 <https://youtu.be/Rg4z8gDHbHU>

- **ASPEN study for Waldenstrom's macroglobulinemia**

*Professor Constantine Tam, Peter MacCallum Cancer Centre & Royal Melbourne Hospital (Melbourne)*

🔍 <https://youtu.be/YHy-zBrlHuQ>



Left: Donna Gairns, Lymphoma Australia Right: Dr Michael Dickinson, Peter MacCallum Cancer Centre & Royal Melbourne Hospital

# Relapsed or refractory classical Hodgkin *Lymphoma* – in focus

Dr Robin Gasiorowski, a Consultant Haematologist at Concord Hospital in Sydney, spoke with Donna Gairns from Lymphoma Australia during the EHA Congress.

Dr Gasiorowski was one of the lead investigators on the KEYNOTE-204 study that was presented at the EHA Congress for patients with relapsed or refractory (R/R) classical Hodgkin lymphoma (cHL). The results of this study may be considered as the new standard of treatment in the current management of R/R cHL.

## Background

Classical Hodgkin lymphoma (cHL) is the name given to the group of 4 main types of Hodgkin lymphoma (HL), that are aggressive B-cell lymphomas. The group does not include another subtype called nodular lymphocyte predominant Hodgkin lymphoma, a rare indolent type of HL. Overall patients with cHL achieve complete metabolic remission after first-line treatment in around 90% of cases, however those who have R/R HL are difficult to treat and often do poorly.

There is currently no standard of care for this group.

Pembrolizumab (pembro) is a PD-1 inhibitor, that is a type of immunotherapy used for R/R cHL. It stimulates that body's own immune system to fight cancer cells. It targets and blocks a protein called PD-1 on the surface of T-cells, that triggers them to find and kill cancer cells. It is currently funded in Australia for those who have R/R cHL. This is for patients who have received an autologous stem cell transplant (auto-SCT) or are found to be unsuitable for an auto-SCT. Side effects include; fatigue and immune mediated responses to organs.

Brentuximab vedotin (BV) is a drug conjugate (an immunotherapy and chemotherapy combined) that is used to treat cHL in the R/R setting. BV works by targeting a particular marker on the cells that have CD30 and that delivers the toxic agent into the cell, to kill it. This is also funded in Australia for patients with R/R after auto-SCT or are found to be unsuitable for an auto-SCT. Side effects include; lowers blood counts, nausea, peripheral neuropathy and fatigue.

# The 25<sup>th</sup> European Hematology Association (EHA) Congress

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## KEYNOTE-204 study

KEYNOTE-204 was a randomised, international, open-label, phase 3 trial that looked at the outcomes of either using pembro or BV in R/R cHL subtypes, as a single agent (monotherapy). There is currently no standard of care for R/R cHL, but the results of this trial may give clinicians more assistance to help guide them to recommend treatment.

All suitable patients (300 in total) were either post an auto-SCT or were unsuitable for auto-SCT and had either R/R disease. The primary end point (the goal) of the trial was to see the progression free survival (PFS) or the length of time during and after treatment before the disease progresses.

Patients were followed up for an average of 24.7 months, the median PFS was 13.2 months with pembro and 8.3 months with BV. Patients had a longer median time to progression when they received the pembro and means that there

is a 35% improved outcome. Patients also had less side effects when receiving pembro in comparison to BV.

## Conclusion

The results of this study concluded that pembro should be the preferred treatment of choice or considered as the new standard of care for those with R/R cHL. In Australia, both of these therapies are PBS funded in this clinical setting. The answers of this trial may provide clinicians with more information to provide to patients and can help with treatment decisions of which drug to recommend for their patients.

For more information see the interview with Dr Robin Gasiorowski & Donna Gairns (Lymphoma Care Nurse) on the Lymphoma Australia YouTube channel.

 <https://youtu.be/SkLKYLFGwAc>

## Meet the *Lymphoma* Australia staff members

For those who are new to Lymphoma Australia, I would like to introduce you to our current team members:

**Sharon Millman** CEO  
**Donna Gairns** National Nurse Director

**Carol Cahill**  
**Josie Cole**

**Samantha Ormerod**  
**Rebekah Needer**  
**Rebecca Beck**

Community Support Manager  
National Community Engagement Manager  
Lymphoma Care Nurse – QLD  
Lymphoma Care Nurse – QLD  
Lymphoma Care Nurse – NSW



# Lymphoma and CLL pharmaceutical updates

Please see below the results and updates from the November 2019 and March 2020 Pharmaceutical Benefits Advisory Committee (PBAC) meetings.

Drug name and sponsor	Subtype	Listing requested and purpose	PBAC outcome
Ibrutinib (Janssen)	Chronic lymphocytic leukaemia (CLL) or small lymphocytic lymphoma (SLL)	Resubmission to request PBS reimbursement for the treatment of CLL or SLL with evidence of one or more 17p chromosome deletion	PBAC recommended the PBS listing of ibrutinib for first-line treatment with CLL/ SLL with deletion 17p – <i>still waiting to be PBS listed, since November 2019</i>
Acalabrutinib (AstraZeneca)	Chronic lymphocytic leukaemia (CLL) or small lymphocytic lymphoma (SLL)	To request PBS listing for the treatment of patients with relapsed or refractory CLL or SLL unsuitable for treatment with a purine analogue	PBAC recommended the listing of acalabrutinib for the treatment of patients with R/R CLL/SLL in second line treatment – <i>waiting to be PBS listed since March 2020</i>
Pembrolizumab (MSD)	Primary mediastinal B-cell lymphoma (PMBCL)	Resubmission to request PBS listing for the treatment of relapsed or refractory PMBCL	PBAC recommended the PBS listing of pembrolizumab for R/R PMBCL – <i>waiting to be PBS listed since March 2020</i>
Venetoclax (AbbVie)	Chronic lymphocytic leukaemia (CLL)	PBS listing in combination with obinutuzumab for the first-line treatment of patients with CLL & unsuitable for fludarabine based chemotherapy	The PBAC did not recommend the listing due to the cost-effectiveness of the model that was provided & will need to be revised with ongoing work with AbbVie – <i>see July 2020 meeting</i>

Please see below the July 2020 PBAC meeting agenda for lymphoma and CLL, that will be discussed.

Submission type	Drug name and sponsor	Drug type and use	Listing requested by sponsor/ purpose
New listing (major submission)	Acalabrutinib (AstraZeneca)	Chronic lymphocytic leukaemia (CLL) or small lymphocytic lymphoma (SLL)	To request an Authority Required listing for the treatment of patients with previously untreated CLL or SLL. A second request was for use only in the subgroup of patients with a 17p deletion.
New listing (major submission)	Mogamulizumab (Kyowa Kirin)	Cutaneous T-cell lymphoma (CTCL)	To request for funding listing for patients with relapsed or refractor CTCL who have been previously treated with at least one prior systemic therapy.
Change to listing (minor submission)	Venetoclax (AbbVie)	Chronic lymphocytic leukaemia (CLL)	Resubmission to request an Authority listing, for the first-line treatment of patients with CLL who are unsuitable for fludarabine based chemotherapy.

# Medical services advisory committee (MSAC) updates

Medical services advisory committee (MSAC) are reviewing the submission to expand the existing medical benefits scheme (MBS) Item 73343.

This will ensure all patients who are diagnosed with CLL/SLL will have FISH testing (genetic profile test), publicly funded prior to receiving

treatment. The results from this submission is still pending a decision from the committee.

Research has shown that patients who are found to have a deletion 17p or del(17p) do not respond to standard first line treatment of chemotherapy and immunotherapy. These patients respond best to immunotherapy, such as a BTK inhibitor, including ibrutinib or acalabrutinib.

## Lymphoma Australia - patient referral form

A reminder that Lymphoma Australia have developed a new patient and carer referral form. The referral form has been developed to help connect patients and their loved ones to Lymphoma Australia. This will ensure that they receive all the information that they need to know about their subtype, treatment and supportive care options.

A referral will also ensure that those affected by lymphoma know about our organisation early in their journey, so that they also stay connected with support and the latest information and clinical trials. It would be great to hear your feedback. The process includes:

- The referral form can either be completed online or printed
- Healthcare professionals can refer the patient by completing their details for them or the form can be given to the patient if they have the ability to complete the form for you
- Email the completed form to Lymphoma Australia's Lymphoma Care Nurse team [nurse@lymphoma.org.au](mailto:nurse@lymphoma.org.au)
- The Lymphoma Care Nurses will triage and contact the patient to support them
- Resources and information will be sent to the patient/carers as required

A link to the form can be found under the ['healthcare professionals/nurses'](#) tab or we can send you hard copies. Please just email us: [nurse@lymphoma.org.au](mailto:nurse@lymphoma.org.au)

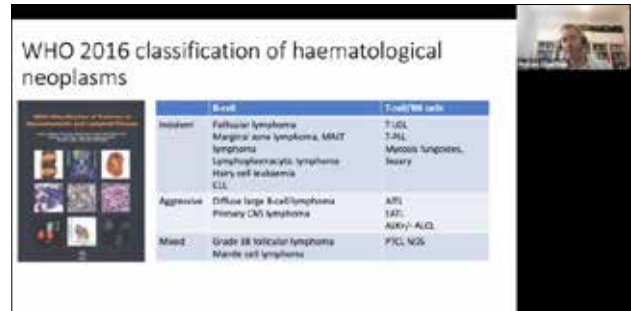


# Novel therapies: indolent and aggressive *Lymphoma* - event

Lymphoma Australia, along with many other organisations, have entered the virtual world.

On 11 May 2020 we held our planned education events as national webinars. Thank you to everyone who attended, as we had a fantastic response with over 300 registrations from all over Australia and NZ. This included 100 cancer nurses.

- Novel therapies in indolent lymphoma: Dr Michael Gilbertson, Monash Health
- Novel therapies in aggressive lymphoma & CAR T-cell therapy: Dr Michael Dickinson, Peter MacCallum Cancer Centre
- Emotional impact of cancer: Clem Byard, Cancer Council – Victoria
- Clinical Trials in Australia: Kate Halford, ALLG
- Lymphoma Australia Update: Donna Gairns, Lymphoma Australia



Screenshot of Dr Michael Gilbertson's presentation

<https://youtu.be/x56oCT76b5w>

<https://youtu.be/x56oCT76b5w>

We plan to continue the webinar format to ensure that we can reach a greater audience. For those who missed the event, we have recorded these, and you can watch them via our [Lymphoma Australia YouTube channel](#).

## CAR T-cell therapy in Brisbane!

It has just been announced on 30 June 2020, that CAR T-cell therapy is now available commercially in Brisbane.

The Royal Brisbane and Women's Hospital (RBWH) is now a certified and activated as a Kymriah (Novartis product) site for both adolescents and young adults' patients with

acute lymphoblastic leukaemia (ALL) and adults (over 18 years) with diffuse large B-cell lymphoma (DLBCL).

This is the first treatment site in Queensland for commercial CAR T-cell therapy and only the second site in Australia set up for funded DLBCL treatment. The other site is Peter MacCallum Cancer Centre in Melbourne. Great news for patients.

# Lunch with *Lymphoma* Australia - education series

The Lymphoma Care Nurse team with Lymphoma Australia are launching “Lunch with Lymphoma” lunchtime webinar sessions.

These will be held every Thursday from 2 July between 12:30-1:30pm (EST). There will be a different lymphoma related topic every week that will be hosted and presented by our Lymphoma Care Nurses and/or expert guest.

The sessions are mainly aimed at patients, their loved ones and the general community, however healthcare professionals are most welcome to join us too. Watch them during your lunch break, or in the comfort of your home via your computer, iPad or phone.

You can register through the [Lymphoma Australia website](#) and download event posters.

## July 2020 Program

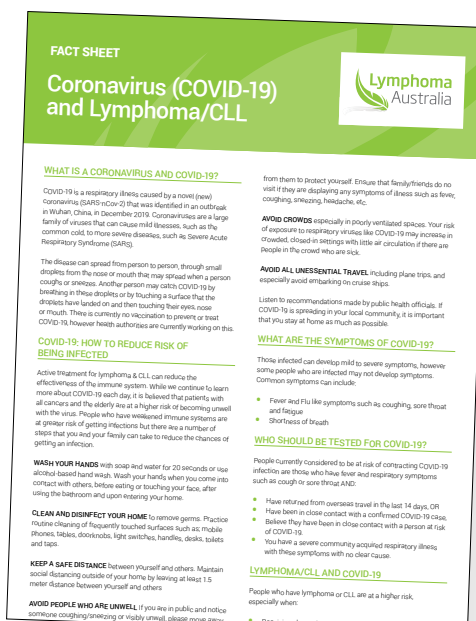
- 02 July Hodgkin lymphoma**  
– Rebekah Needer, LCN
- 09 July Non-Hodgkin lymphoma**  
– Samantha Ormerod, LCN
- 16 July Monoclonal antibodies (rituximab & obinutuzumab)**  
– Rebecca Beck, LCN
- 23 July Chemotherapy & managing common side effects**  
– Donna Gairns, LCN
- 30 July Fatigue and lymphoma**  
– Rebekah Needer, LCN
- 06 Aug Exercise programs & behavioural strategies to form good habits after treatment**  
– guest speaker Camille Short, behavioural scientist (Melbourne University)

For more information or future suggestions: [nurse@lymphoma.org.au](mailto:nurse@lymphoma.org.au)

# COVID-19 and Lymphoma

The lymphoma/CLL community have been especially anxious during the COVID-19 pandemic. As restrictions ease in some states, this has caused some patients to be even more concerned about their health.

A reminder that Lymphoma Australia have developed [patient resources](#) to you can give to your lymphoma/CLL patients to provide them with information about COVID-19 and ways to stay healthy. It also



COVID-19 Fact Sheet

provides them with the facts and where to get reliable information.

## New nurse learning modules – Lymphoma/CLL – Coming soon!

Lymphoma Australia are excited to announce that we will be launching a series of nurse learning modules coming soon!

These will be a series of 10 learning modules that will contain expert presentations about everything you need to know about lymphoma/CLL and caring for the patient. We plan to have a combination of live and recorded webinars, so that you can tune in across Australia!

Topics will include:

- Lymphoma/CLL pathophysiology
- Diagnosis & staging – what is involved

- How is lymphoma treated now & emerging novel therapies?
- Transplants & CAR T-cell therapy
- Indolent lymphoma
- Aggressive lymphoma
- Lymphoma in paediatric, AYA and older adults
- Fertility preservation
- Relapsed & refractory lymphoma
- Survivorship care
- Incorporating nursing implications throughout
- Patient experience

For more information contact Donna Gairns, [donna.gairns@lymphoma.org.au](mailto:donna.gairns@lymphoma.org.au)

# eviQ Module 2 – Introduction to Haematology and bone marrow transplantation

The second module of the eLearning series, Introduction to haematology and bone and marrow transplantation has been released onto eviQ. [Module 2](#) focuses on haematological disease including leukaemia, lymphoma and myeloma, created for health professionals new to or who have an interest in Haematology and BMT. This series is a joint collaboration between

eviQ and the Agency for Clinical Innovation NSW (ACI NSW).

The module is a wonderful overview and easy to follow eLearning module explaining what each of the haematological malignancies. The modules explain the symptoms, how they are diagnosed and staged, followed by short quiz.

## eviQ Haematology protocol updates

### New protocols recently published

- [ID 3792](#) - Non-Hodgkin lymphoma polatuzumab vedotin, bendamustine and rituximab

### Protocols recently updated

- [ID 3573](#) - Non-Hodgkin lymphoma O-CHOP21 (obinutuzumab CYCLOPHOSPHamide DOXOrubicin vinCRISTine prednisolone) - evidence updated
- [ID 3554](#) - Non-Hodgkin lymphoma bendamustine and obinutuzumab - evidence updated
- [ID 3595](#) - Non-Hodgkin lymphoma O-CVP (obinutuzumab CYCLOPHOSPHamide

vinCRISTine prednisolone) - evidence updated

- [ID 1858](#) - Chronic lymphocytic leukaemia ibrutinib - evidence updated

### Protocols recently superseded

- [ID 1551](#) - Hodgkin lymphoma ICE (infusional iFOSFamide cARBOplatin etoposide) - superseded
- [ID 968](#) - Primary CNS lymphoma (PCNSL) (methotrexate and cytarabine) - superseded
- [ID 1565](#) - Primary CNS lymphoma (PCNSL) high dose methotrexate - superseded
- [ID 1566](#) - Primary CNS lymphoma (PCNSL) MBVP (methotrexate carmustine teniposide prednisolone) - superseded

Thank you again for all of your support for the work that we do. Please do not hesitate to contact us if you have any questions or suggestions. **Donna Gairns** National Nurse Director  
[donna.gairns@lymphoma.org.au](mailto:donna.gairns@lymphoma.org.au) or **0404 749 884**



Join our dedicated closed Facebook group for patients and carers by searching **Lymphoma DOWN UNDER**

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