

## Xpovio® (selinexor) - New indication

- On June 22, 2020, <u>Karyopharm Therapeutics announced</u> the FDA approval of <u>Xpovio (selinexor)</u>, for the treatment of adult patients with relapsed or refractory diffuse large B-cell lymphoma (DLBCL), not otherwise specified, including DLBCL arising from follicular lymphoma, after at least 2 lines of systemic therapy.
  - This indication is approved under accelerated approval based on response rate. Continued approval for this indication may be contingent upon verification and description of clinical benefit in a confirmatory trial(s).
- Xpovio is also approved in combination with dexamethasone for the treatment of adult patients with relapsed or refractory multiple myeloma who have received at least four prior therapies and whose disease is refractory to at least two proteasome inhibitors, at least two immunomodulatory agents, and an anti-CD38 monoclonal antibody.
- The approval of Xpovio for the new indication was based on SADAL, a single-arm, open-label study
  of 134 adults with relapsed or refractory DLBCL, not otherwise specified, after 2 to 5 systemic
  regimens. Efficacy was based on overall response rate (ORR) and duration of response (DOR).
  - The ORR was 29%. Of the patients with a response, 38% (15/39) maintained a response at 6 months and 15% (6/39) maintained a response at 12 months.
- The most common adverse reactions (≥ 20%) with Xpovio use in patients with DLBCL, excluding laboratory abnormalities, were fatigue, nausea, diarrhea, appetite decrease, weight decrease, constipation, vomiting, and pyrexia. Grade 3 to 4 laboratory abnormalities (≥ 15%) were thrombocytopenia, lymphopenia, neutropenia, anemia, and hyponatremia.
- The recommended dose of Xpovio for the treatment of DLBCL is 60 mg taken orally on days 1 and 3 of each week until disease progression or unacceptable toxicity.
  - Refer to the Xpovio drug label for multiple myeloma dosing.



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