

GROUNDBREAKING CANCER IMMUNOTHERAPY NOW AVAILABLE

CAR T-Cell Therapy is available for patients with relapsed diffuse large B-cell lymphoma, relapsed mantle cell lymphoma, follicular lymphoma and lymphoblastic leukemia (ALL), and multiple myeloma.

Franciscan HEALTH
CANCER CENTER



Groundbreaking Cancer Immunotherapy Available

Franciscan Health Indianapolis is one of only two hospitals in the state to offer this breakthrough therapy, which uses a person's own immune cells to help fight cancer. The Indiana Blood & Marrow Transplantation (IBMT) Program at Franciscan Health Indianapolis has been involved in CAR T-Cell Therapy and clinical research for years, and has one of the largest research programs in Indiana, providing access to national and first-in-the-world clinical trials. CAR T-Cell Therapy is currently FDA-approved and available outside a clinical trial.

What Is It?

CAR T-Cell Therapy is an FDA-approved, targeted individualized immunotherapy for the use in relapsed diffuse large B-cell lymphoma, relapsed mantle cell lymphoma, follicular lymphoma and lymphoblastic leukemia (ALL), and multiple myeloma.

Who Is It For?

YESCARTA – INDICATED FOR PATIENTS WITH:

FOLLICULAR LYMPHOMA: Relapsed or refractory follicular lymphoma in adults after 2 or more lines of systemic therapy

LARGE B-CELL LYMPHOMA: Large B-cell lymphoma in adults that is refractory to first line chemoimmunotherapy or that relapses within 12 months of first-line chemoimmunotherapy, or treatment of relapsed or refractory large B-cell lymphoma in adults after 2 or more lines of systemic therapy

BREYANZI (lisocabtagene maraleucel) - INDICATED FOR PATIENTS WITH:

LARGE B-CELL LYMPHOMA: Relapsed or refractory large B-cell lymphoma, including diffuse large B-cell lymphoma (DLBCL) and low grade or indolent lymphoma that have transformed to DLBCL, high-grade B-cell lymphoma, primary mediastinal large B-cell lymphoma, and follicular lymphoma grade 3B in adults who have refractory disease to first-line chemoimmunotherapy or relapse within 12 months of first-line chemoimmunotherapy (early treatment failure ETF), refractory disease to first-line chemoimmunotherapy or relapse after first-line chemoimmunotherapy and are not eligible for hematopoietic stem cell transplantation due to comorbidities or age; or relapsed or refractory disease after 2 or more lines of systemic therapy.

KYMRIAH – INDICATED FOR PATIENTS WITH:

B-CELL PRECURSOR ACUTE LYMPHOBLASTIC LEUKEMIA: B-cell precursor acute lymphoblastic leukemia (ALL) that is refractory or in second or later relapse in patients up to 25 years of age

LARGE B-CELL LYMPHOMA: Relapsed or refractory large B-cell lymphoma in adults after 2 or more lines of chemoimmunotherapy including large cell lymphoma arising from follicular lymphoma

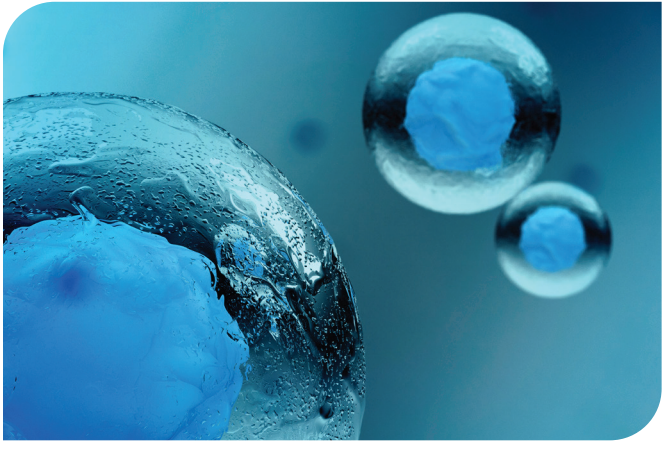
FOLLICULAR LYMPHOMA: Relapsed or refractory follicular lymphoma in adults after 2 or more lines of systemic therapy

Who Is It For?

TECARTUS - INDICATED FOR PATIENTS WITH:

MANTLE CELL LYMPHOMA: Relapsed or refractory mantle cell lymphoma (MCL) in adults

B-CELL PRECURSOR ACUTE LYMPHOBLASTIC LEUKEMIA: Relapsed or refractory B-cell precursor acute lymphoblastic leukemia (ALL) in adults



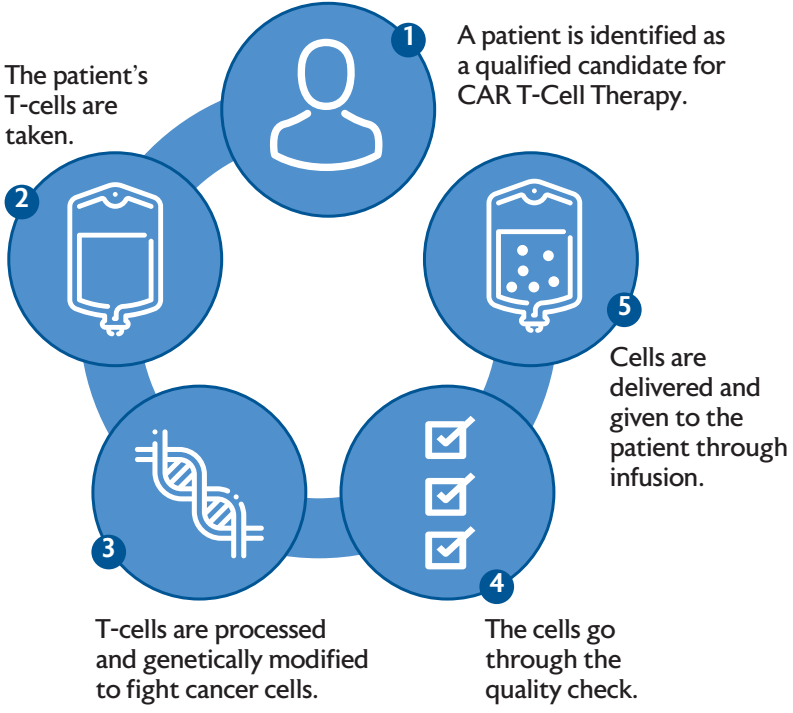
ABECMA (Idecabtagene vicleucel) - INDICATED FOR PATIENTS WITH:

MULTIPLE MYELOMA: Relapsed or refractory multiple myeloma in adults after ≥4 prior lines of therapy, including an immunomodulatory agent, a proteasome inhibitor, and an anti-CD38 monoclonal antibody.

ABECMA is a B-cell maturation antigen (BCMA)-directed genetically modified autologous T-cell immunotherapy in which a patient's T-cells are reprogrammed with an anti-BCMA chimeric antigen receptor. Antigen-specific activation of ABECMA results in CAR-positive T-cell proliferation, cytokine secretion, and subsequent cytolytic killing of BCMA-expressing cells.

HOW DOES CAR T-CELL THERAPY WORK?

CAR T-Cell Therapy is a one-time treatment of a single infusion of the patient's own T-cells that have been modified to target cancer. The patient's T-cells are removed and sent to a lab where they are modified to recognize and attack cancer. Following chemotherapy, they are then infused back into the body to find and eliminate cancer cells. These altered cells live in the body for long-term cancer defense.



INDIANA BLOOD & MARROW TRANSPLANT CARE TEAM



LUKE AKARD, MD
Blood & Marrow Transplant Specialist



FELIX MENSAH, MD
Blood & Marrow Transplant Specialist



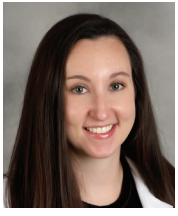
ANAND TANDRA, MD
Blood & Marrow Transplant Specialist



FRANCINE FIGG, NP



EMILY JESTER, PA



SAMANTHA LEVERING, NP

Refer a Patient

(317) 528-5500

We will review patient history and determine if they qualify.

Patients who qualify for CAR T-Cell Therapy will be seen by our nationally recognized physicians who pioneered the first transplant program for blood cancer in Indiana, and are experienced in this novel therapy. The care team is comprised of blood and marrow transplant specialists including hematologist oncologists, nurses, nurse practitioners, a physician assistant, pharmacists and dedicated nurse navigators.

Requirements for Car-T Cell Therapy

THERE IS NO AGE LIMIT FOR CAR T-CELL THERAPY.

What About Physical Fitness?

It's important for patients to have good overall physical health, with no evidence of untreated significant heart or kidney disease or other relevant medical conditions. Our new Transplant and Cellular Therapy Optimization Program assesses each candidate for areas of opportunity to enhance their performance status prior to CAR T-Cell Therapy.

WHAT ARE THE OTHER REQUIREMENTS?

Distance from Franciscan Health Indianapolis:

Patients must live within an hour drive of the Franciscan Health Indianapolis hospital or be willing to stay at a designated hotel or apartment near the hospital, especially in the first few weeks following infusion. Our social workers and nurse navigators will work with patients who live more than an hour away.

Dedicated Caregiver:

Patients need a responsible, designated caregiver who can accompany them 24-hours a day, seven days a week. Caregivers do not need medical training and can be a relative or friend. There should be a single "point person" designated for communication purposes. Note that other responsible caregivers may assist with transportation, accompanying patients to/from appointments, being at home and more. Caregivers must be able to measure and record vital signs such as temperature. Our team will train patients and caregivers on how to accurately measure vital signs.

Franciscan HEALTH
CANCER CENTER

8111 S. Emerson Ave.
Cancer Center • Suite 105
Indianapolis, IN 46237

ONC082223CI1

(317) 528-5500
FranciscanHealth.org