

Email: emlsecretariat@who.int

RE: Application for Inclusion of Tislelizumab for the treatment of Relapsed or Refractory classical Hodgkin Lymphoma in the 23rd WHO List of Essential Medicine

Dear WHO Expert Committee:

I am writing to support the inclusion of Tislelizumab for the treatment of Relapsed or Refractory classical Hodgkin Lymphoma after at least second-line chemotherapy in the 23rd WHO list of Essential Medicine.

I have trained as a Lymphoma physician and I am now working as a Chief of Lymphoma at Beijing cancer hospital. My research focuses on understanding the basis and treatment of Lymphoma, especially classical Hodgkin Lymphoma and I have published extensively in this area.

Hodgkin Lymphoma (HL) is one of the common type of lymphoma with 83087 new cases and 23376 deaths worldwide in 2020. Among them, classic Hodgkin lymphoma (cHL) accounts for about 90%-95% of HL. The majority of patient with HL can be cured with chemotherapy; however, 5-10% will have refractory disease to front-line therapy and 10-30% will relapse. For those with relapsed or refractory HL, salvage chemotherapy followed by autologous stem cell transplant (ASCT) is standard of care, but half of patients will subsequently have disease progression. Relapse following ASCT has been associated with exceedingly poor prognosis with a median overall survival of 10.5 months to 27.6 months.

In general, an expanding list of novel drugs meets the high clinical needs in patients recurrent after ASCT or not eligible for ASCT. The PD-1 monoclonal antibody (Tislelizumab) shows better and more safety clinical outcome on R/R cHL patients (ORR reaches 87.1%, CR reaches 62.9%). There is strong evidence of the efficacy and safety of Tislelizumab for the treatment of Relapsed or

Refractory classical Hodgkin Lymphoma after at least second-line chemotherapy, and their cost-effectiveness and price advantage, in comparison to other treatments.

Based on the above, strongly support the inclusion of Tislelizumab for the treatment of Relapsed or Refractory classical Hodgkin Lymphoma in the 23rd WHO List of Essential Medicine. Inclusion of Tislelizumab in the 23rd WHO List of Essential Medicine will be a first step towards making this drug available to patients with cHL globally.

Thank you for your time and consideration. Please feel free to contact me with any questions.

Yours faithfully,

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