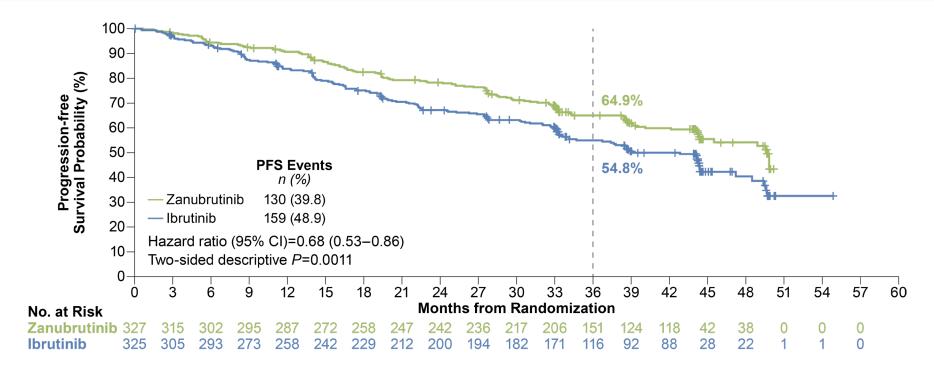
Extended Follow-Up of ALPINE Randomized Phase 3 Study Confirms Sustained Superior Progression-Free Survival With Zanubrutinib vs Ibrutinib for Treatment of R/R CLL/SLL

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Zanubrutinib demonstrated sustained PFS benefit over ibrutinib in patients with R/R CLL/SLL with a median follow-up of 39 months



• Durable PFS benefits were seen across major subgroups, including the del(17p)/TP53^{mut} population

Zanubrutinib continues to demonstrate a more favorable safety and tolerability profile compared with ibrutinib

	Zanubrutinib (n=324)	Ibrutinib (n=324)
Median treatment duration, median (range), months	38.3 (0.4, 54.9)	35.0 (0.1, 58.4)
Any grade adverse events, n (%)	320 (98.8)	323 (99.7)
Grade 3-5	235 (72.5)	251 (77.5)
Grade 5	41 (12.7)	40 (12.3)
Serious adverse events, n (%)	165 (50.9)	191 (59.0)
Adverse events leading to, n (%)		
Dose reduction	47 (14.5)	59 (18.2)
Dose interruption	196 (60.5)	201 (62.0)
Treatment discontinuation	64 (19.8)	85 (26.2)
Hospitalization	150 (46.3)	180 (55.6)
Cardiac adverse events, n (%)	80 (24.7)	112 (34.6)
Serious cardiac adverse events, n (%)	11 (3.4)	31 (9.6)

- No fatal cardiac events occurred with zanubrutinib treatment, and 6 fatal cardiac events occurred with ibrutinib
- Significantly fewer atrial fibrillation/flutter events occurred with zanubrutinib than with ibrutinib (6.8% vs 16.4%; P=.0001)

With over 3 years of follow-up, these data reconfirm that zanubrutinib has improved efficacy over ibrutinib and a more favorable safety profile in patients with R/R CLL/SLL