Tecartus

Generic Name: brexucabtagene autoleucel

Drug Class: Immunotherapy Medications

Company: Kite/Gilead Sciences

Approval Status: Approved

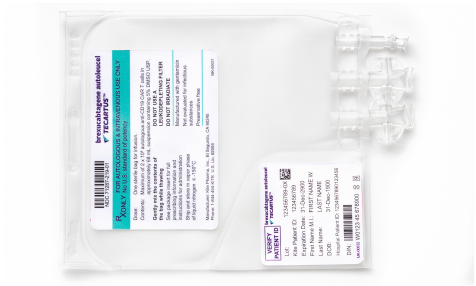
Generic Version Available: No

Experimental Code: KTE-X19

Drug Indication

Tecartus is a CAR-T therapy approved for adults with mantle cell lymphoma who have not responded to or who have relapsed after other kinds of treatment.

General Info



Tecartus is a chimeric antigen receptor T-cell, or CAR-T, therapy. A patient's T cells are collected, genetically reprogrammed by inserting an artificial receptor, multiplied in a lab and reinfused into the same individual. These synthetic receptors help the engineered T cells recognize and attack cancer. Specifically, Tecartus targets the CD19 protein on B cells that grow out of control in leukemia and lymphoma.

The ZUMA-2 trial showed an overall response rate of 87% and a complete remission rate of 62% for adults with relapsed or refractory mantle cell lymphoma who were treated with a single infusion of Tecartus. The treatment was first approved in July 2020.

Dosage

Dosing Info:

Tecartus involves a single infusion of genetically modified T cells. The turnaround time from cell collection to reinfusion of the altered cells is about two weeks. Chemotherapy is given before the CAR-T infusion to kill cancerous immune cells and make room for the new ones.

Side Effects

CAR-T therapy can cause potentially severe immune reactions. Unleashing genetically modified T cells can lead to cytokine release syndrome (CRS), in which the new cells trigger excessive immune activation that can lead to organ failure and neurological symptoms. The most common adverse reactions include fever, chills, low or high blood pressure, difficulty breathing, encephalopathy fatigue, headache, heart rhythm abnormalities, gastrointestinal symptoms and laboratory abnormalities. Tecartus and conditioning chemotherapy can cause depletion of red blood cells (anemia), white blood cells (neutropenia and lymphopenia) and platelets (thrombocytopenia), which can lead to infections. The excessive immune reaction can lead to organ failure and death, but it can be managed if caught early.

For More Info:
https://www.gilead.com/news-and-press/press-room/press-releases/2020/7/us-fda-approves-kites-tecartus-the-first-and-only-car-t-treatment-for-relapsed-or-refractory-mantle-cell-lymphoma

Last Reviewed: July 24, 2020