

CLINICIAN GUIDE TO CAR T-CELL THERAPY FOR R/R NHL

In 2017, the first CAR T-cell therapy was approved for adults with R/R LBCL.^{1,2} Patients who may be eligible for CAR T-cell therapy should be referred to a CAR T-cell therapy center for evaluation as soon as possible.

Memorial Sloan Kettering Cellular Therapy Service Contacts

- **MSK Cellular Therapy Service Main Phone Number:** 1-888-MSK-CART (1-888-675-2278)
- **Phone Line for Clinicians (available 24/7):** 646-677-7440
- **Referring Provider Team:** <https://www.mskcc.org/cancer-care/diagnosis-treatment/cancer-treatments/immunotherapy/car-cell-therapy>

FDA-Approved CAR T-cell Therapies for R/R NHL¹

(as of July 30, 2026)

	TARGET	FDA-APPROVED INDICATION(S)
Lisocabtagene maraleucel (liso-cel)	CD19	• LBCL, including DLBCL not otherwise specified, high grade BCL, primary mediastinal LBCL, and FL grade 3B, that is R/R to 1L chemoimmunotherapy, R/R to 1L chemoimmunotherapy where patients are not eligible for HSCT due to comorbidities or age, or R/R after ≥2 lines of systemic therapy • R/R CLL or SLL who have received ≥2 lines therapy, including a BTK inhibitor and BCL-2 inhibitor^a • R/R FL who have received ≥2 prior lines of systemic therapy • R/R MCL after ≥2 lines of systemic therapy, including a BTK inhibitor • R/R MZL after ≥2 lines of systemic therapy
Axicabtagene ciloleucel (axi-cel)	CD19	• LBCL that is R/R to 1L chemoimmunotherapy • R/R LBCL after ≥2 lines of systemic therapy for DLBCL not otherwise specified, primary mediastinal LBCL, high grade B-cell lymphoma, and DLBCL arising from FL • R/R FL after ≥2 lines of systemic therapy^a
Brexucabtagene autoleucel (brexu-cel)	CD19	• R/R MCL
Tisagenlecleucel (tisa-cel)	CD19	• R/R LBCL after ≥2 lines of systemic therapy, including DLBCL not otherwise specified, high grade BCL, and DLBCL arising from FL • R/R FL after ≥2 of systemic therapy^a

Considerations When Determining Patient Eligibility for CAR T-cell Therapy³

- ✓ Characteristics like **advanced age, poor performance status, impaired cardiovascular, pulmonary, renal, and/or hepatic function, autoimmune disease, obesity, history of solid organ transplantation, and CNS involvement** should not exclude patients from being referred for CAR T-cell treatment if otherwise eligible.

CAR T-cell treatment is complex and relies on a multidisciplinary team. Continued clear communication between all members of the care team is critical to ensure optimal patient care.⁴

BCL, B-cell lymphoma; BTK, Bruton tyrosine kinase; CAR, chimeric antigen receptor; CD19, cluster of differentiation 19; CLL, chronic lymphocytic leukemia; CNS, central nervous system; DLBCL, diffuse LBCL; FDA, US Food and Drug Administration; FL, follicular lymphoma; HSCT, hematopoietic stem cell transplantation; LBCL, large BCL; MCL, mantle cell lymphoma; MSK, Memorial Sloan Kettering; NHL, non-Hodgkin lymphoma; MZL, marginal zone lymphoma; R/R, relapsed/refractory; SLL, small lymphocytic lymphoma.

^aApproved under accelerated approval based on response rate and duration of response. Continued approval for this indication may be contingent upon verification and description of clinical benefit in confirmatory trial(s).

1. Drugs@FDA. <https://www.accessdata.fda.gov/scripts/cder/daf/index.cfm>; 2. Bhaskar ST, et al. *Clin Hematol Int*. 2024;6(4):93-99; 3. Shadman M, et al. *Transplant Cell Ther*. 2026;32(3):277-287; 4. Beupierre A, et al. *J Adv Pract Oncol*. 2019;10(suppl 3):29-40.