



Landscape of Diffuse Large B-Cell Lymphoma (DLBCL) in Brazilian Public Healthcare System (SUS)

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INTRODUCTION

DLBCL is the most common subtype of non-Hodgkin lymphoma, many patients manage to live disease free for a long time, however, patients under 2 line of treatment have poor prognosis. According to NCCN Guidelines, tafasitamab, polatuzumab and lisocabtagene maraleucel are preferred 2 line treatments for DLBCL patient's ineligible for transplantation. None of these options are registered in Brazil and only tafasitamab obtained registration this year.

OBJECTIVES

To characterize DLBCL patients' population, costs and treatment patterns in the Brazilian public healthcare system (SUS).

METHODOLOGY

Retrospective analysis of the number of diagnostics, costs, and therapies used to treat DLBCL patients (ICD-10 code C83.3), considering out and in-patient data from SUS database between March 2008 and December 2022.

RESULTS

The number of diagnostics grew between 2008 and 2015, however, it has been dropping since 2016 from 3.619 to 1.292 cases in 2022. 85% of patients went through chemotherapy. Of these, 85%, 11% and 4.4% in 1, 2 and 3 line, respectively. 9% of patients were treated with radiotherapy, while 13% did not receive either chemotherapy or radiotherapy. From 2016 to 2021 the cost of DLBCL treatment has increased 25%, or R\$ 24 million to R\$ 30 million out-patient, and 60%, or R\$ 4.5 million to R\$ 7.2 million in-patient setting. The main 1st line regimens used were R-CHOP (79%), R-DA-EPOCH (14%) and R-CEOP (5%). And in 2nd line R-ICE (26%), R-DHAP (25%), R-GemOx (16%), R-DA-EPOCH (11%), R-CHOP (11%) and rituximab (7%).

Figure 1: DLBCL diagnosed patients in SUS

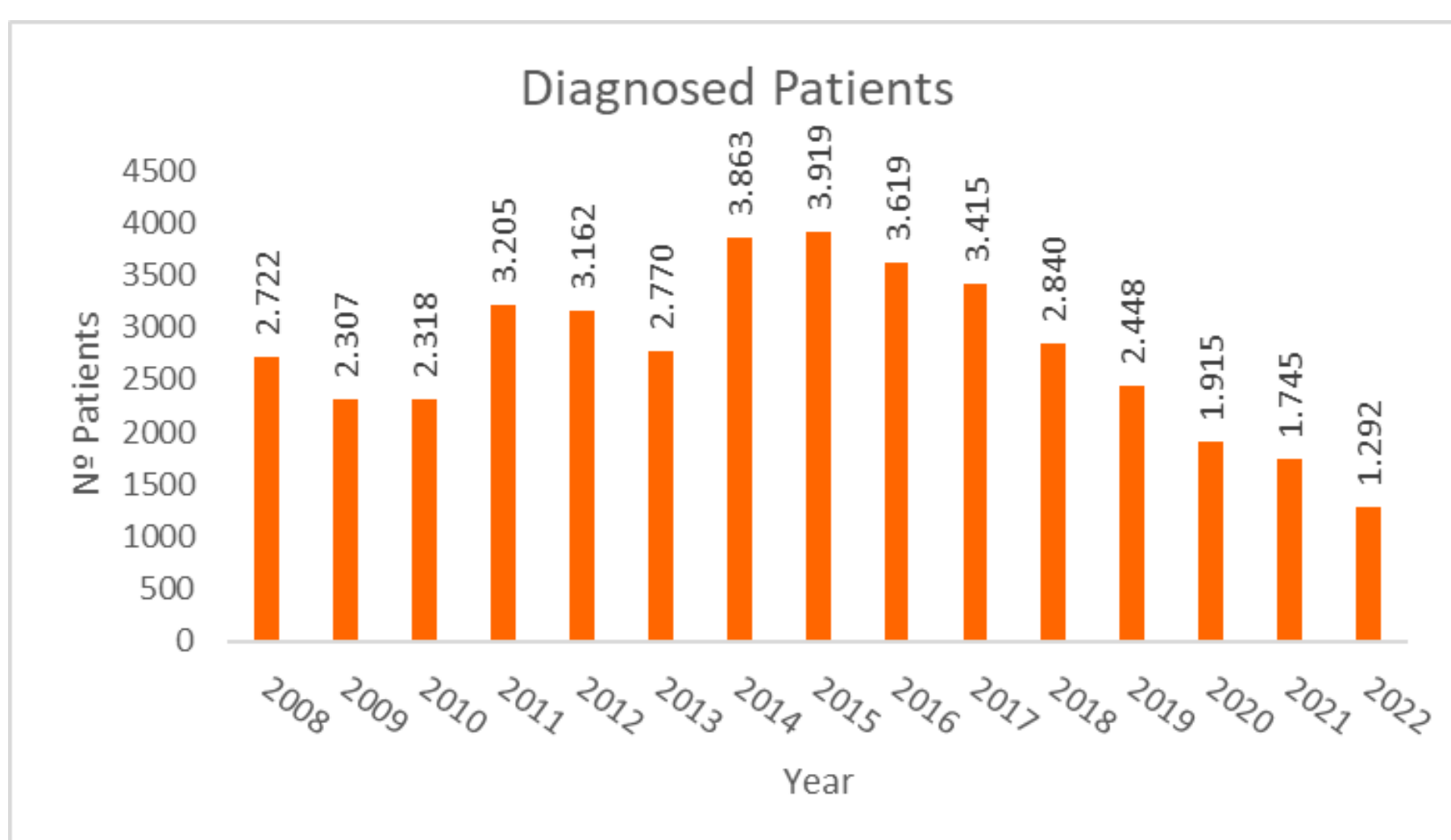


Figure 2: Patients Age Distribution

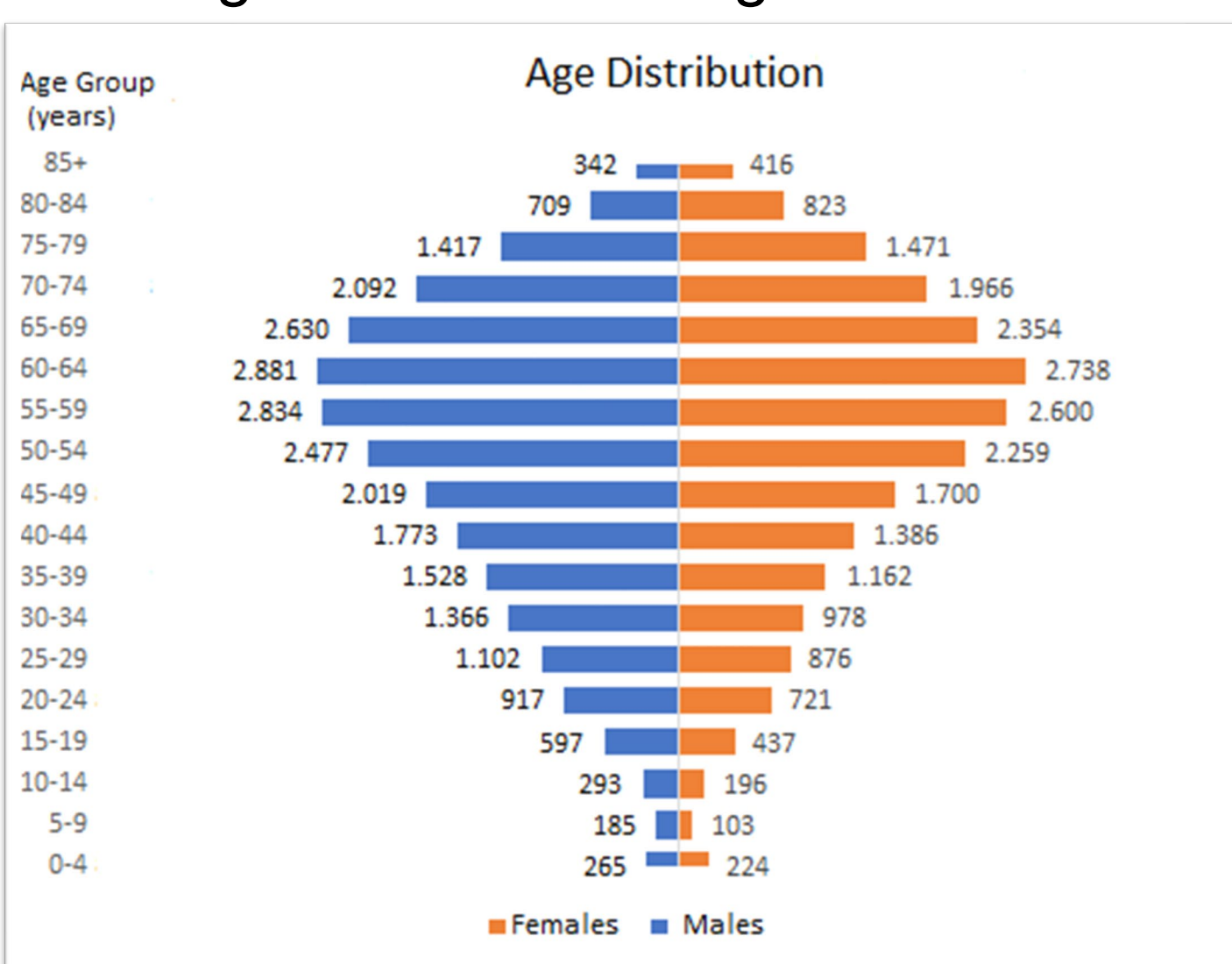


Figure 3: Patients Across the Country

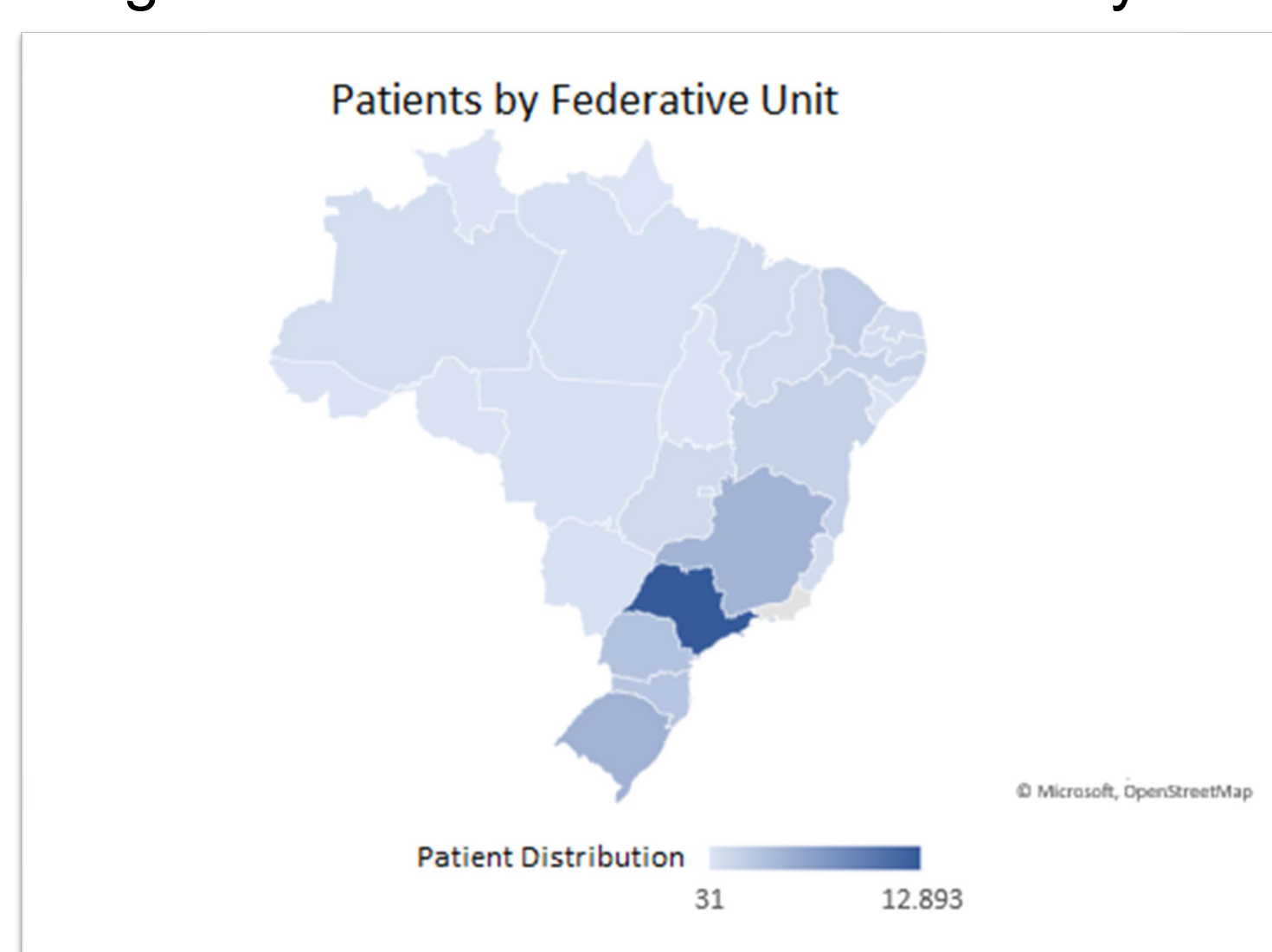


Figure 4: Outpatient Costs

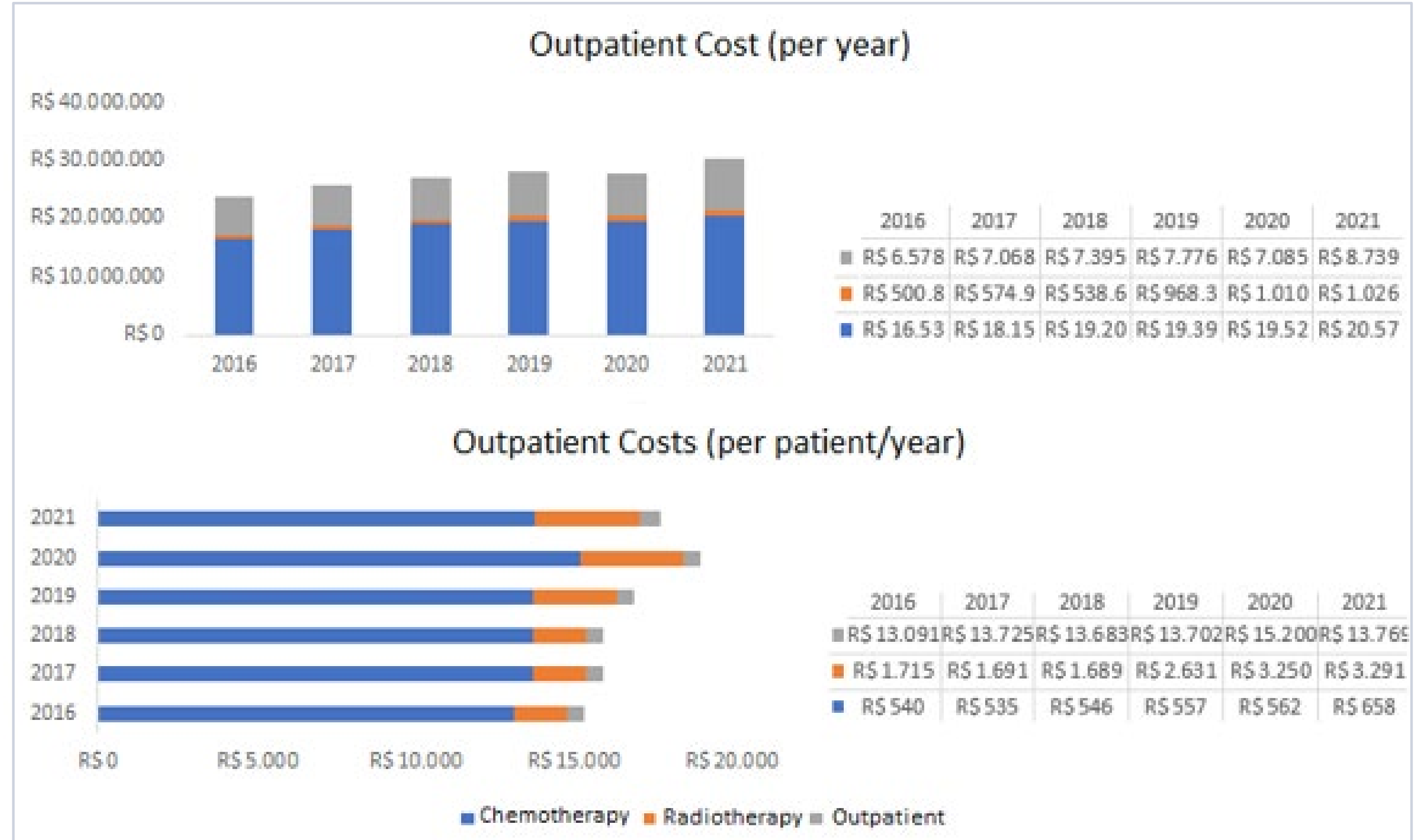


Figure 5: In-patients Costs

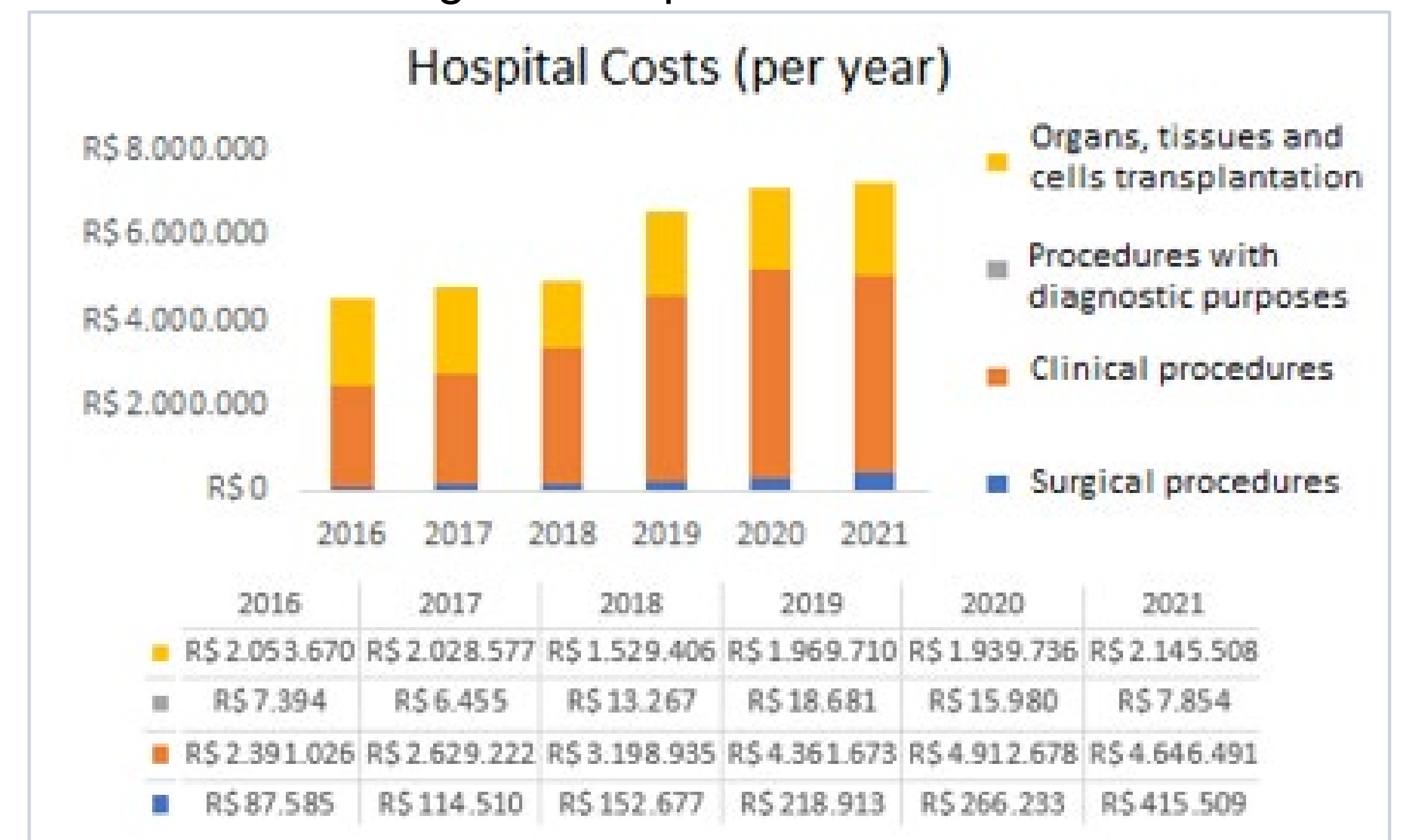
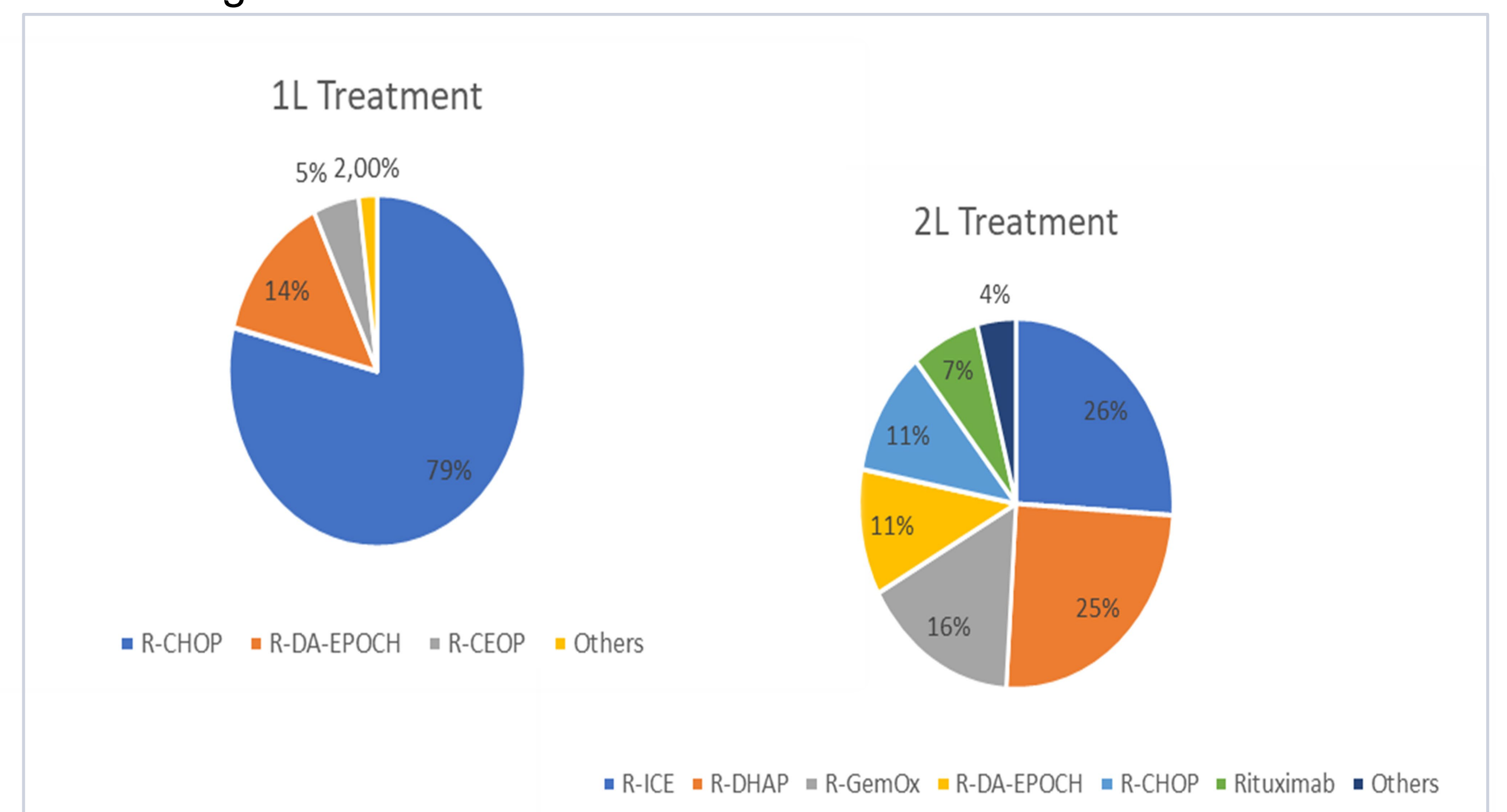


Figure 6: 1L and 2L DLBCL Treatments used in SUS



CONCLUSION

It was observed a possible underdiagnosis for DLBCL since 2016. On the other hand, the cost of treatment has progressively increased. According to the data, there is a therapeutic gap for DLBCL patients in 2nd line of treatment and ineligible to transplantation, once no therapies designated for this indication are being used in Brazil.

REFERENCES

BRASIL. Ministério da Saúde. DATASUS (Departamento de Informática do SUS). c2008. Disponível em: <<http://www2.datasus.gov.br/DATASUS/index.php>>. Accessed in: 13th June 2023.