IMBRUVICA® (ibrutinib) is indicated:

- For the treatment of patients with previously untreated active chronic lymphocytic leukemia (CLL), including those with 17p deletion.

  Clinical effectiveness of IMBRUVICA® in previously untreated patients with CLL with 17p deletion is based on the benefit observed in patients with CLL with 17p deletion who have received at least one prior therapy. Clinical trial data in previously untreated patients with CLL with 17p deletion are very limited.
- In combination with obinutuzumab for the treatment of patients with previously untreated active CLL, including those with 17p deletion.
- For the treatment of patients with CLL who have received at least one prior therapy, including those with 17p deletion.
- In combination with bendamustine and rituximab for the treatment of patients with CLL who have received at least one prior therapy.

  Clinical trial data with IMBRUVICA® in combination with bendamustine and rituximab in patients with CLL with 17p deletion are limited.
- For the treatment of patients with relapsed or refractory mantle cell lymphoma (MCL).
- For the treatment of patients with marginal zone lymphoma (MZL) who require systemic therapy and have received at least one prior anti-CD20-based therapy.
- For the treatment of patients with Waldenström's macroglobulinemia (WM).

  Clinical effectiveness of IMBRUVICA® is based on response rates demonstrated in a single-arm study in patients who had received at least one prior therapy.
- In combination with rituximab for the treatment of patients with WM.
- For the treatment of patients with steroid dependent or refractory chronic graft versus host disease (cGVHD).

Consult the Product Monograph at http://www.janssen.com/canada/products for information regarding warnings, precautions, adverse reactions, interactions, dosing and conditions of clinical use. The Product Monograph is also available by calling 1-800-567-3331 or 1-800-387-8781.

Reference: IMBRUVICA® Product Monograph, Janssen Inc., April 17, 2020.

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