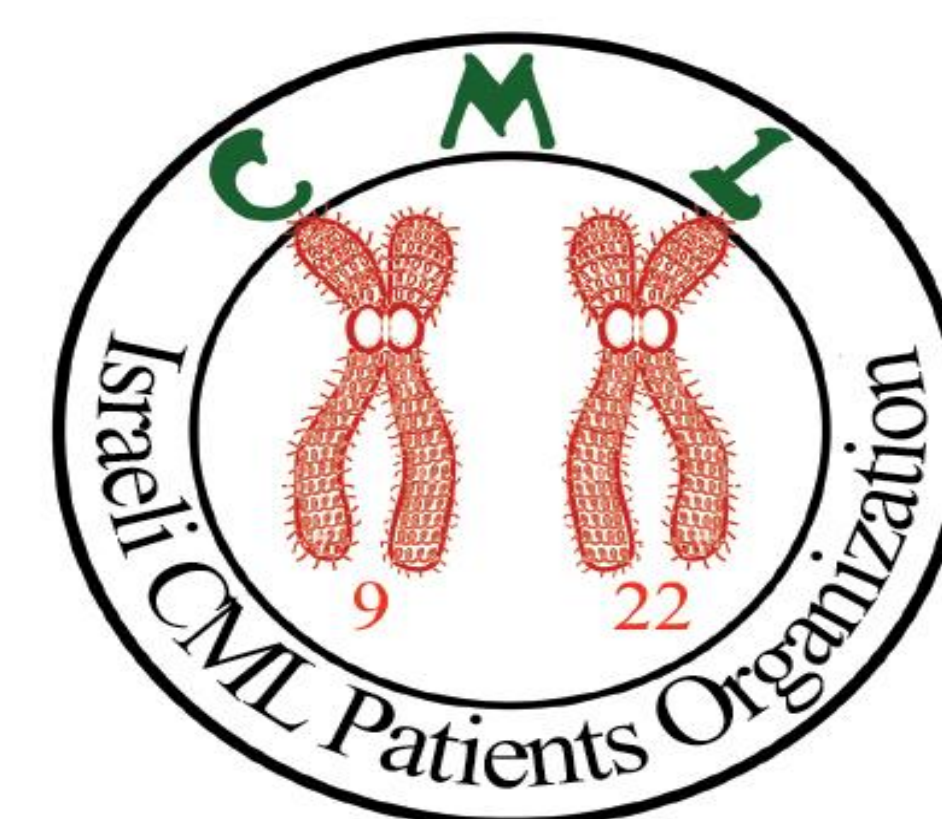


QOL of CML patients

Real world evidence on QOL from 233 Israeli CML patients
Using validated EORTC CML- 24 and QLQ - C30 questionnaires



Why did we do this survey?

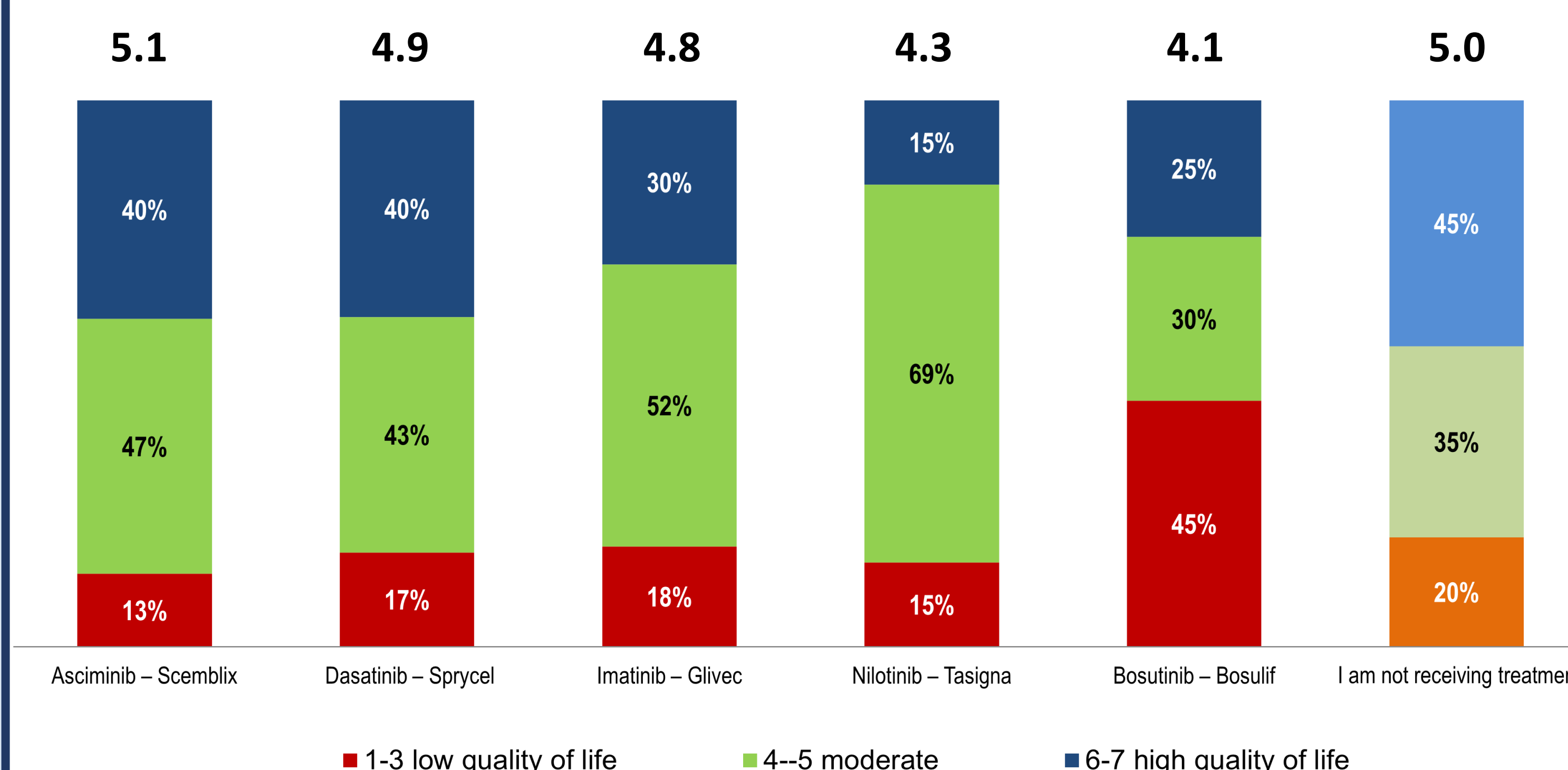
1. **Treatment Goes Beyond Survival** - While CML treatments (like TKIs) have greatly improved survival, they often come with chronic side effects (e.g., fatigue, nausea, muscle cramps) that affect patients' daily lives. QoL surveys help assess how well patients are living, not just how long.

2. **Understanding Patient Experience** - Clinical metrics (like blood counts or BCR-ABL levels) do not capture subjective experiences such as: Emotional distress, Cognitive changes and Social isolation and influence of the treatment on the QoL.

3. **Optimizing Treatment Decisions** - QoL data helps patients and hematologists: Decide whether to adjust treatment doses, Consider treatment-free remission (TFR) and Choose supportive care interventions.

4. **Empowering Patients** - Involving patients in QoL surveys: Encourages shared decision-making and Helps them voice concerns that might otherwise be overlooked in routine visits.

QoL rating In the past week by treatment



Conclusions

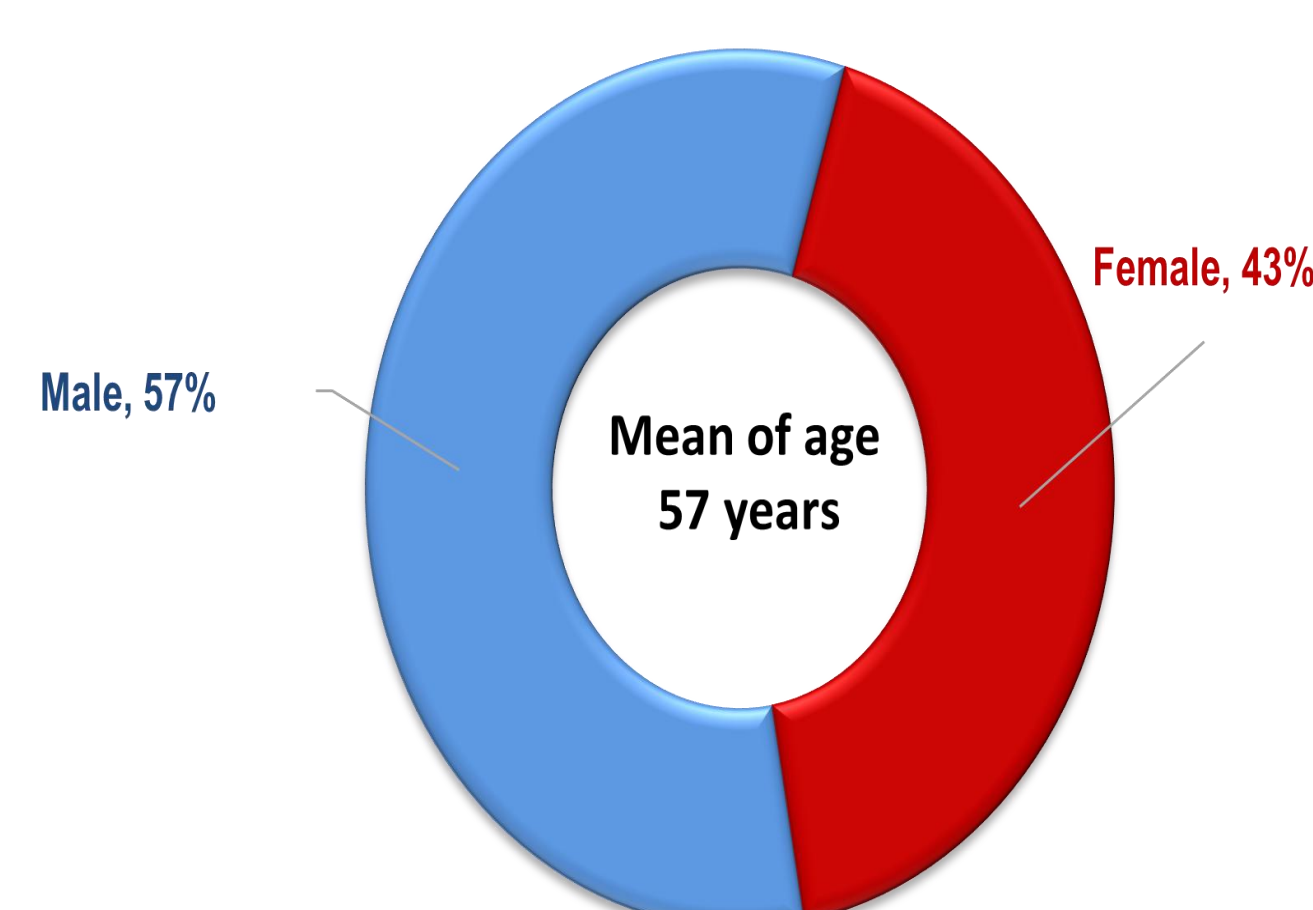
- In conclusion, no differences were found between the medications, but it appears that Asciminib (Scemblix) is better for patients in terms of health status and quality of life. In the short term (up to a week), Dasatinib (Sprycel) also appears favorable, and in the long term, Imatinib (Gleevec).
- No significant differences were observed between treatments in terms of quality-of-life ratings over the past week (based on averages). However, those treated with Asciminib - Scemblix reported relatively better health compared to patients on other therapies, followed by those receiving Dasatinib.
- No significant differences were observed between treatments in terms of overall health status over the past week (based on averages). However, those treated with Asciminib - Scemblix reported relatively better health compared to patients on other therapies.
- No significant differences were observed between treatments in terms of quality-of-life ratings over the past 3 months (based on averages). However, patients treated with Imatinib reported relatively better quality of life compared to those on other therapies, followed by those receiving Dasatinib.
- Patients in the group age of 20-40 reported on average worse QoL and Health status than older patients.

In collaboration with Rabin Hospital we launched a national CML patients survey incorporating QOL validated questionnaires like the EORTC CML 24, and QLQ C-30 + few added questions.

All costs were covered by the hospital and the patients organization - no sponsorship raised.

233 CML patients answered the survey

Gender and Age



Type of treatment

