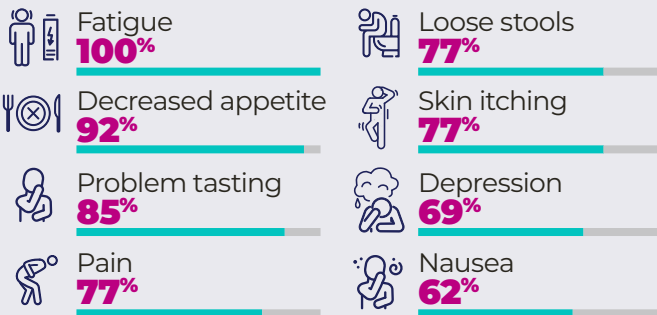


Negative Impacts of aGVHD on Health-Related Quality of Life (HR-QoL)

aGVHD is associated with a decline in patient-reported QoL, physical functioning, mental functioning, social functioning, and general health^{1a,2b}

HIGH SYMPTOM BURDEN AND PREVALENCE IN PATIENTS WITH aGVHD (GRADE II-IV)^{3c,4}



~61% of patients report problems performing usual activities^{5d}

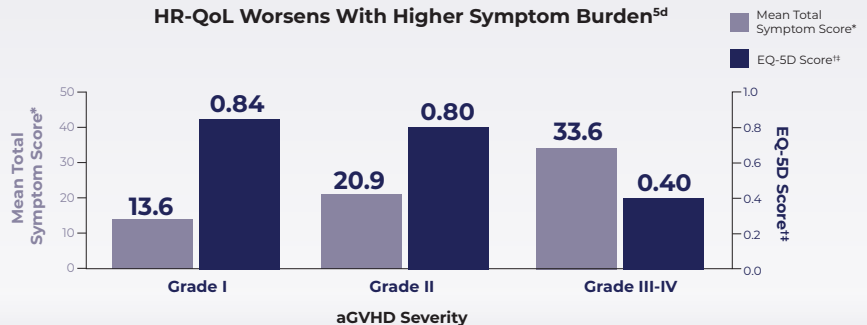


Patients require specialized and supportive care for recovery, including physical therapy, rehabilitation, and occupational therapy.^{2b,6}

PATIENT QOL WORSENS WITH INCREASING aGVHD GRADE^{2b,5d}

High symptom burden and life-threatening organ damage from aGVHD contributes to worsening QoL^{2b,3c}

HR-QoL Worsens With Higher Symptom Burden^{5d}



STERIOD-REFRACTORY (SR-aGVHD) MAY FURTHER WORSEN HR-QOL COMPARED TO GVHD OR NO GVHD

EQ-5D Score in Allo-HCT Recipients[‡]



16% of patients with SR-aGVHD reported a health state worse than death^{1a}

aGVHD, of particularly higher grade and SR disease, has a negative impact on HR-QoL due to high symptom burden. This underscores the need for effective first-line treatment options to reduce aGVHD severity and mitigate risk of progression to SR-aGVHD^{1a,2b,5d}

*Total symptom score is a measure of symptom burden, with higher scores representing increased symptom burden.⁵

†Clinically meaningful difference.⁵

‡The EQ-5D is a standardized measure of health status developed to describe and value health across a wide range of disease areas. Health state index scores generally range from less than 0 (where 0 is the value of a health state equivalent to dead and negative values representing values as worse than dead) to 1 (the value of full health), with higher scores indicating higher health utility.⁸

§A European, multi-national, placebo-controlled, randomized, Phase 3 trial (HOVON 113 MSC) in patients who underwent HCT for hematological diseases and subsequently developed SR-aGVHD that evaluated HR-QoL as a secondary objective in 26 adult patients.¹

¶A retrospective analysis of 3426 adult patients who underwent their first and only allo-HCT at the Fred Hutchinson Cancer Center, between 2001 and 2019, to examine late effects of severe aGVHD on quality of life, medical comorbidities, and survival.²

‡A prospective pilot study to assess the feasibility of a patient-reported symptom survey in a cohort of 66 patients within the first 100 days of allo-HCT in patients who developed clinically significant aGVHD from 2018 to 2020.³

§A cross-sectional survey that collected physician-completed patient record forms and patient-completed forms (EQ-5D-5L) from 68 patients with aGVHD from 5 countries.⁵

¶A cross-sectional questionnaire study of 524 adult patients, recruited between August 2011 and September 2012, that were diagnosed acute leukemia to investigate patient-reported QoL in patients after treatment.⁷

aGVHD=acute GVHD; allo=allogeneic; EQ-5D=EuroQol 5 Dimension; GVHD=graft-versus-host disease; HCT=hematopoietic cell transplantation; QoL=quality of life.

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