Drug assessment at a glance: A26-57[1]

Blinatumomab (B-ALL, relapsed or refractory)

9 November 2026

[1] This is a courtesy translation of the summary provided as a service by IQWiG. For further information on the subject matter and the result of the assessment, please refer to the dossier assessment for Project A26-57. The GBA decides on the added benefit.

Research question 1 of the benefit assessment

Population	Adults with Ph+, CD19+, relapsed or refractory B-cell precursor ALL in whom treatment with at least 2 TKIs has failed and who have no alternative treatment options
Intervention	blinatumomab
Comparator	Individualised treatment, selecting from: Combination therapies: ▪ dasatinib or ponatinib in combination with prednisone or prednisolone or dexamethasone ▪ dasatinib or ponatinib in combination with dexamethasone and vincristine ▪ dasatinib or ponatinib in combination with cyclophosphamide, dexamethasone and vincristine ▪ dasatinib or ponatinib in combination with cyclophosphamide, daunorubicin, dexamethasone and vincristine ▪ dasatinib or ponatinib in combination with cyclophosphamide, daunorubicin, prednisone and vincristine ▪ dasatinib or ponatinib in combination with hyper-CVAD (hyperfractionated cyclophosphamide in combination with cytarabine, dexamethasone, doxorubicin, methotrexate and vincristine) ▪ hyperfractionated cyclophosphamide in combination with cytarabine, dexamethasone, doxorubicin, methotrexate and vincristine ▪ hyperfractionated cyclophosphamide in combination with cytarabine, dexamethasone, doxorubicin, methotrexate, vincristine and pegaspargase ▪ cyclophosphamide in combination with dexamethasone and vincristine ▪ cyclophosphamide in combination with dexamethasone, doxorubicin and vincristine ▪ cyclophosphamide in combination with daunorubicin, prednisone, pegaspargase and vincristine ▪ cyclophosphamide in combination with cytarabine, daunorubicin, dexamethasone, mercaptopurine, pegaspargase and vincristine ▪ cyclophosphamide in combination with cytarabine, daunorubicin, mercaptopurine, pegaspargase, prednisone and vincristine ▪ dexamethasone in combination with doxorubicin, methotrexate, pegaspargase and vincristine ▪ mercaptopurine in combination with methotrexate, prednisone and vincristine ▪ methotrexate in combination with dexamethasone, pegaspargase and vincristine ▪ prednisone in combination with vincristine

See above	Monotherapy: ▪ imatinib
Outcomes	At least one patient-relevant outcome

Overview of positive and negative effects – research question 1

	Size of the effects		Informative value of the effects	
Mortality	∅		–	
Morbidity	∅		–	
Symptoms	∅		–	
Health-related quality of life	∅		–	
Side effects	∅		–	
	∅	No (suitable) data	–	Not applicable
	↔	No advantage or disadvantage	★	Low
	↑ / ↓	Small advantage/disadvantage	★★	Moderate
	↑↑ / ↓↓	Moderate advantage/disadvantage	★★★	High
	↑↑↑ / ↓↓↓	Large advantage/disadvantage		

Overall: No advantage or disadvantage (no suitable data)

Evidence base and noteworthy aspects – research question 1

- No relevant study was identified.

Research question 2 of the benefit assessment

Population	Adults with Ph-, CD19+, relapsed or refractory B-cell precursor ALL
Intervention	blinatumomab
Comparator	Individualised treatment, selecting from: Combination therapies: ▪ hyperfractionated cyclophosphamide in combination with cytarabine, dexamethasone, doxorubicin, methotrexate and vincristine ▪ hyperfractionated cyclophosphamide in combination with cytarabine, dexamethasone, doxorubicin, methotrexate, vincristine and pegaspargase ▪ cyclophosphamide in combination with dexamethasone and vincristine ▪ cyclophosphamide in combination with dexamethasone, doxorubicin and vincristine ▪ cyclophosphamide in combination with daunorubicin, prednisone, pegaspargase and vincristine ▪ cyclophosphamide in combination with cytarabine, daunorubicin, dexamethasone, mercaptopurine, pegaspargase and vincristine ▪ cyclophosphamide in combination with cytarabine, daunorubicin, mercaptopurine, pegaspargase, prednisone and vincristine ▪ dexamethasone in combination with doxorubicin, methotrexate, pegaspargase and vincristine ▪ mercaptopurine in combination with methotrexate, prednisone and vincristine ▪ methotrexate in combination with dexamethasone, pegaspargase and vincristine ▪ prednisone in combination with vincristine Monotherapies: ▪ tisagenlecleucel and ▪ brexucabtagene autoleucel
Outcomes	At least one patient-relevant outcome

Overview of positive and negative effects – research question 2

	Size of the effects	Informative value of the effects
Mortality	∅	–
Morbidity	∅	–
Symptoms	∅	–
Health-related quality of life	∅	–
Side effects	∅	–
	∅ No (suitable) data ↔ No advantage or disadvantage ↑ / ↓ Small advantage/disadvantage ↑↑ / ↓↓ Moderate advantage/disadvantage ↑↑↑ / ↓↓↓ Large advantage/disadvantage	– Not applicable ★ Low ★★ Moderate ★★★ High

Overall: No advantage or disadvantage (no suitable data)

Evidence base and noteworthy aspects – research question 2

- No suitable data were available.
- The data presented from the TOWER randomised controlled trial comparing blinatumomab with 4 chemotherapy regimens were not suitable, as they did not allow for a comparison of blinatumomab with the comparator therapy.

References

Institut für Qualität und Wirtschaftlichkeit im Gesundheitswesen. Blinatumomab (B-ALL, rezidiviert oder refraktär); Nutzenbewertung gemäß § 35a SGB V; Dossierbewertung [online]. 2026 [Accessed: 19.11.2026]. URL: https://doi.org/10.60584/A26-57.

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English translations for this project are published at https://www.iqwig.de/en/projects/a26-57.html and https://www.iqwig.de/en/projects/a26-122.html.

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