Value of Medical Innovation in Mantle Cell Lymphoma

The incidence of cancer continues to increase worldwide. In recent years, substantial progress has been made through medical innovation to help people manage diseases such as cancer, allowing them to live longer. Much work remains to be done, however, particularly for rare diseases that have not historically been a focus of medical innovations.

Mantle cell lymphoma (MCL) is a sub-type of lymphoma—a cancer of white blood cells called lymphocytes, which normally help the body fight infection. Lymphomas, which usually begin in the lymph nodes, are divided into two categories: Hodgkin lymphoma and non-Hodgkin lymphoma (NHL), which is further divided into several sub-types, including MCL.

Incidence of NHL has increased:

- 1975: 90%
- 2010: 41%

MCL accounts for less than 10% of NHLs.

Despite advances in the treatment of NHL as a whole, the survival rate for patients with MCL remains considerably lower.

Incidence of MCL is expected to increase from 2007 to 2013:

- 2007: 49.9% as of 1990
- 2006: 41% as of 2005
- 2008: 54.6% as of 2009

Pre-1995 Chemotherapy is the standard treatment for NHL. Autologous bone marrow transplantation improves survival for patients with diffuse large B-cell lymphoma.

1995 First targeted therapy approved by FDA.

2005 Proteasome inhibitor approved by FDA.

2008Radioimmunotherapy approved by FDA.

Roughly 1/2 of people diagnosed with MCL are over the age of 68.

Men are more than 60% more likely to be affected by NHL than woman.

Caucasians are over 55% more likely to be affected by NHL than African Americans.

About 4,000 new cases of MCL are diagnosed in the United States each year.

509,065 people living with NHL.

69,740 expected new cases of NHL in 2013.