










Follicular Lymphoma (FL)

Follicular lymphoma (FL) is a subtype of B-cell lymphoma, a form of non-Hodgkin's lymphoma (NHL), that develops when the body makes an abnormal amount of B lymphocytes.

Normally, lymphocytes go through a standard life cycle where they die and then the body generates new ones to replace them. However, in FL, abnormal lymphocytes continue to grow in a slow and uncontrolled manner and the oversupply of these cells crowd into the lymph nodes, causing them to swell. These abnormal lymphocytes usually develop in clumps, referred to as follicles, inside lymph nodes.


Incidence	Signs and symptoms
 <p>FL is the second most common type of NHL and accounts for 22% of all NHL cases, with approximately 15,000 cases in the United States per year</p>  <p>Average age of diagnosis is 65</p>  <p>Swelling typically occurs in the lymph nodes in the neck, armpit or groin</p>	<p>Some people with FL do not experience any symptoms, but symptoms of FL can include:</p>  <p>Fever</p>  <p>Unexplained weight loss</p>  <p>Fatigue</p>  <p>Sweating and chills</p>  <p>Painless swelling of lymph nodes</p> <p>Due to quiet nature of the disease, most cases are not diagnosed until stage 3 or 4</p>

Stages and diagnosis of FL




Stage	Description	Percentage of cases
Stage 1	Cancer is found on one group of lymph nodes	~25%
Stage 2	Cancer is found on two or more groups of lymph nodes on the same side of the diaphragm	~15%
Stage 3	Cancer is found on lymph nodes on both sides of the diaphragm	~26%
Stage 4	Cancer has spread outside of the lymph nodes to bone marrow and/or other organ systems	~27%
Unknown	Unknown	~7%


Healthcare providers may use several tests to diagnose FL, such as:



Biopsy




Blood test




Imaging test such as a CT or PET scan

In some cases, instead of treatment, an HCP may recommend active surveillance, meaning that the disease is monitored through regular checkups or follow-up evaluations, if there are no symptoms or evidence that the cancer is growing or spreading. Active treatment may be started if FL-related symptoms begin to develop or if there are signs of disease progression.


Treatment options may include




Radiation



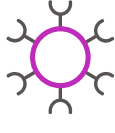
Monoclonal antibody therapy



Stem cell transplant



Drug therapy




Cell therapy

As FL is considered an incurable disease, there remains unmet need for two main reasons:

01 Relapse


FL symptoms often subside after treatment and then come back. This cycle of remission-relapse-remission can leave patients feeling like they're never "done" with treatment.



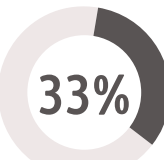
20% of patients experience disease relapse within 2 years of treatment

02 Transformation

FL can change or transform into diffuse large B-cell lymphoma (DLBCL), a more aggressive cancer that typically causes new and more significant symptoms, including progression into other areas of the body.



Transformation can occur in any type of lymphoma, but is most common in FL



In 10 years, up to 33% of FL cases will transform into a more aggressive cancer

It is important for people with FL to understand their disease, recognize signs and symptoms and **talk to a healthcare professional** about available treatment options.