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In Brief

Asparaginase *Erwinia chrysanthemi* (Erwinaze) for ALL

The FDA has approved asparaginase *Erwinia chrysanthemi* (Erwinaze–EUSA), an asparagine-specific enzyme derived from the gram-negative bacillus *Erwinia chrysanthemi*, for use in combination with other chemotherapeutic agents for treatment of acute lymphoblastic leukemia (ALL) in patients who have had allergic reactions to *Escherichia coli*-derived asparaginase (Elspar or pegaspargase [Oncaspar]).

ALL is the most common malignancy of childhood. Multidrug chemotherapy can cure about 80% of children with ALL.1 Initial treatment (“induction”) usually includes vincristine, a glucocorticoid, and an asparaginase and/or an anthracycline. Inclusion of an asparaginase in ALL regimens improves outcomes, especially in pediatric patients, but approximately 15-20% of patients treated with *E. coli*-derived asparaginase will develop hypersensitivity to the drug.

In one study, 42 *E. coli* asparaginase-allergic children with ALL were switched to twice-weekly *Erwinia* asparaginase 25,000 IU/m² to complete 30 weeks of asparaginase treatment; 81% of patients completed ≥26 weeks of therapy. At a median follow-up of 5.4 years, event-free survival in those children was similar to that of children without *E. coli* asparaginase allergy (86% vs. 81%). Allergy to *Erwinia* asparaginase developed in 33% of patients.2
