



**XOSPATA™ is the only approved
FLT3 inhibitor able to target
both FLT3-ITD and FLT3-TKD
mutations in relapsed or refractory
FLT3-mutated AML^{1,2}**

**FLT3 MUTATIONS ARE
THE MOST COMMON
MUTATIONS IN AML³**

~30%
FLT3-ITD
mutation³

~7%
FLT3-TKD
mutation³



**FLT3 MUTATION
STATUS IS UNSTABLE
AND CAN CHANGE
DURING DISEASE
PROGRESSION⁴**

NCCN GUIDELINES®

RECOMMEND TO TEST FOR
FLT3-ITD AND FLT3-TKD MUTATIONS
AT EACH RELAPSE OR PROGRESSION⁶



**In 17 of 80 (21%) AML patients,
the FLT3 mutation status switched
between diagnosis and relapse⁵**

To correctly identify eligible
patients for FLT3 inhibitors, **FLT3
mutation testing should be
performed also at relapse⁴**



**RESULTS OF FLT3 TESTING
SHOULD BE AVAILABLE WITHIN
48-72 HOURS⁷**



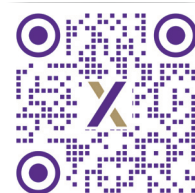
References: **1.** Zhao J et al. Biomark Res 2019;7:19. **2.** Tarver TC et al. Blood Adv 2020;4(3):514-524. **3.** Patel JP et al. N Engl J Med 2012;366(12):1079-1089. **4.** Daver N et al. Leukemia 2019;33(2):299-312. **5.** Schnittger S et al. Blood 2009;114(11):2220-2231. **6.** National Comprehensive Cancer Network. https://www.nccn.org/professionals/physician_gls/PDF/aml.pdf [NCCN Clinical Practice Guidelines in Oncology/Acute Myeloid Leukemia/Version 2.2025 - January 27, 2025/Accessed on 09-09-2025 – Login required]. **7.** Döhner H et al. Blood 2017;129(4):424-447.

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Scan for ABPI



XOSPATA[®]
gilteritinib 40 mg
film-coated
tablets