ADVERSE EVENT MANAGEMENT

BLINCYTO® DOSE ADJUSTMENTS FOR ADVERSE EVENTS[1]

Permanently discontinue BLINCYTO® if Grade 4* CRS occurs.[1]

Dose should be withheld if Grade 3* (severe) CRS occurs.[1]

Once resolved, restart BLINCYTO® in patients weighing ≥45 kg at 9 mcg/day and escalate to 28 mcg/day after 7 days if the toxicity does not recur.[1]

In patients weighing <45 kg, restart BLINCYTO® at 5 mcg/m^2/day and escalate to 15 mcg/m^2/day after 7 days if the toxicity does not recur.[1]

Consider permanent discontinuation of BLINCYTO® if Grade 4* neurological event or more than one seizure occurs.[1]

Dose should be withheld if Grade 3* (severe) neurological event occurs until no more than Grade 1 (mild) and for at least 3 days.[1]

Upon improvement to no more than Grade 1 (mild) and after at least 3 days, in patients weighing ≥45 kg, treatment should be reinitiated at 9 mcg/day and escalated to 28 mcg/day after 7 days if the toxicity does not recur. If the toxicity occurred at 9 mcg/day, or if the toxicity takes more than 7 days to resolve, discontinue BLINCYTO® permanently.[1]

Upon improvement to no more than Grade 1 (mild) and after at least 3 days, in patients weighing <45 kg, treatment should be reinitiated at 5 mcg/m^2/day and escalated to 15 mcg/m^2/day after 7 days if the toxicity does not recur. If the toxicity occurred at 5 mcg/m^2/day, or if the toxicity takes more than 7 days to resolve, discontinue BLINCYTO® permanently.[1]

For reinitiation, premedication with 24 mg dexamethasone with a 4-day taper is required in patients weighing ≥45 kg.[1] As secondary prophylaxis, appropriate anticonvulsant medication should be considered.[1]

Permanently discontinue BLINCYTO® if Grade 4* adverse reaction occurs.[1]

Dose should be withheld if Grade 3* (severe) adverse reaction occurs.[1]

Once no more than Grade 1 (mild), restart BLINCYTO® in patients weighing ≥45 kg at 9 mcg/day and escalate to 28 mcg/day after 7 days if the toxicity does not recur.[1]

In patients weighing <45 kg, restart BLINCYTO® at 5 mcg/m^2/day and escalate to 15 mcg/m^2/day after 7 days if the toxicity does not recur.[1]

BLINCYTO® should be permanently discontinued if any of the following occur:[1]

- Grade 4* (life-threatening) neurologic event
- More than one seizure
- Neurologic event leading to treatment interruption that requires greater than a week to resolve
- Grade 3* (severe) neurologic event that occurs at 9 mcg/day dose in patients weighing ≥45 kg or 5 mcg/m^2/day dose in those weighing <45 kg leading to treatment interruption
- Grade 4* events other than neurologic events or CRS

A benefit-risk assessment is recommended to determine whether to reinitiate or permanently discontinue BLINCYTO® treatment.[1]

For more information about the safety profile of BLINCYTO®, please refer to the Approved Product Information.[1]

*Grading based on NCI CTCAE 4.0. Grade 3 is severe, and grade 4 is life-threatening.

Reference: 1. BLINCYTO® (blinatumomab) Product Information. www.amgen.com.au/Blincyto.PI.

BLINCYTO®
(blinatumomab)

For more information on BLINCYTO® or to report any adverse events or product complaints involving BLINCYTO® please contact Australia Medical Information on 1800 803 638

PBS Information: Section 100 listed. Authority required.
Refer to PBS Schedule for full Authority listing.

***WARNING*:** *The following have occurred in patients receiving BLINCYTO®:*
• Cytokine Release Syndrome, which may be life-threatening or fatal • Neurological toxicities, which may be severe, life-threatening, or fatal • Reactivation of JC viral infection
Interrupt or discontinue BLINCYTO® as recommended if any of these adverse events occur
(See Section 4.4 Special warnings and precautions for use and Section 4.2 Dose and method of administration).

REFER TO FULL PRODUCT INFORMATION BEFORE PRESCRIBING; AVAILABLE FROM AMGEN AUSTRALIA PTY LTD, PH: 1800 803 638 OR AT WWW.AMGEN.COM.AU/BLINCYTO.PI

For more information about BLINCYTO® or to report an adverse event or product complaints about BLINCYTO®, please contact Amgen Medical Information on 1800 803 638.

BLINCYTO® Minimum Product Information: Indication: treatment of relapsed or refractory (R/R) B-cell precursor acute lymphoblastic leukaemia (ALL); treatment of minimal residual disease (MRD) positive ALL in patients in complete haematological remission. **Contraindications:** hypersensitivity to blinatumomab, CHO-derived proteins or any excipient. **Precautions:** neurologic events; increased risk for serious infections; cytokine release syndrome; infusion reactions; tumour lysis syndrome, pancreatitis. Management of these adverse reactions may require interruption or discontinuation of treatment. Neutropenia and febrile neutropenia; elevated liver enzymes; leukoencephalopathy; medication errors – strictly follow preparation and administration instructions. Pregnancy Category: C. Use contraception during and for 48 hours after treatment. Discontinue breast-feeding during and for at least 48 hours after treatment. Do not use recommended adult fixed dose in paediatric patients. No data in patients aged less than 28 days. **Interactions:** low potential of clinically meaningful drug interaction with BLINCYTO® mediated cytokine elevation. Vaccination with live viral vaccines not recommended 2 weeks prior to or during treatment, and until recovery of B lymphocytes to normal range following last treatment cycle. **Adverse Reactions:** Common: infections, pyrexia, infusion-related reactions, headache, anaemia, febrile neutropenia, neutropenia, thrombocytopenia, oedema, increased liver enzymes, fatigue, nausea, tremor, hypokalaemia, diarrhoea, chills. See also Precautions for serious adverse reactions. **Dosage & Administration:** R/R ALL: Single cycle is 4 weeks continuous intravenous (cIV) infusion then 2 week treatment free interval. *For patients greater than or equal to 45 kg (fixed dose)*: Cycle 1 – starting dose 9 micrograms/day for days 1-7, then 28 micrograms/day for days 8-28. All other cycles 28 micrograms/day for 4 weeks. For patients less than 45 kg (body surface area based dose): Cycle 1 – starting dose 5 micrograms/m^2/day for days 1-7 (do not exceed 9 micrograms/day), then 15 micrograms/m^2/day (do not exceed 28 micrograms/day); all other cycles, 15 micrograms/m^2/day (do not exceed 28 micrograms/day). For maintenance, 28 day cIV infusion, then 56 days treatment free. Hospitalise at least first 9 days of Cycle 1 and first 2 days of Cycle 2. Supervision or hospitalisation for other cycle starts and reinitiation. Adults: premedicate with 20 mg IV dexamethasone prior to initiation of each cycle. Intrathecal chemotherapy prophylaxis recommended before and during therapy. Treat with dexamethasone (≤ 24 mg/day) if high tumour burden. Paediatrics: premedicate with dexamethasone 10 mg/m2 (not to exceed 20 mg) oral or IV 6 to 12 hours prior to start of BLINCYTO® (Cycle 1 day 1), followed by premedication with dexamethasone 5 mg/m^2 oral or IV within 30 minutes of start of BLINCYTO® (Cycle 1 day 1). **MRD+ ALL:** 28 day cIV infusion then 14 days treatment free, for up to 4 cycles; premedicate with prednisone 100 mg IV or equivalent 1 hour prior to start of BLINCYTO® each cycle; hospitalise first 3 days Cycle 1 and first 2 days Cycle 2, supervise/hospital for subsequent cycle starts and reinitiation – see full PI. R/R & MRD+ ALL – Interrupt BLINCYTO® if grade 3 neurological events, Cytokine Release Syndrome or other clinically relevant adverse reactions occur see full PI.

BLINCYTO® (blinatumomab)

AMGEN®