BLINCYTO® (blinatumomab)

Important Risk Minimisation Information for Nurses

This educational brochure contains important information regarding the administration of BLINCYTO and the risks of medication errors, neurologic events and cytokine release syndrome

This educational material is essential to ensure the safe and effective use of the product and appropriate management of the important selected risks and therefore it is advised to be read carefully before administering the medicinal product.

Please ensure each patient or caregiver is provided with a copy of the patient educational material and Consumer Medicine Information for reference

If you have any questions about the administration and adverse events of BLINCYTO, please refer to the Product Information (PI) available from Amgen Australia Pty Ltd or http://www.amgen.com.au/Blincyto.PI

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

Important information regarding BLINCYTO therapy

The following actions should be taken to prevent or minimize the risk of medication errors and to provide important counseling information on neurologic events and cytokine release syndrome (CRS)

Administration	IV lines	• Do not flush the infusion lines into the patient, as it will cause an inadvertent bolus of BLINCYTO to be administered. BLINCYTO should be infused through a dedicated lumen.

	Pump specifications and settings	• Only program the pump based on the printed infusion rate on the label attached to the infusion bag.
		• Do not calculate the infusion rate yourself.
		• Lock the pump and make sure the battery is adequately charged with each bag change.
		• If the pump does not appear to perform properly (for example: alarm goes off) at any time, instruct patients and caregivers not to try to fix the pump, tell them to get help from the treating physician or from you immediately
		• Instruct patient:
		  • not to unlock the pump
		  • not to change any pump settings on purpose (with the exception of stopping the pump in case of emergency)
		• Remember to check if the remaining volume of infusion bag correlates with the set infusion rate prior to each bag change. If the remaining volume of infusion bag does not correlate with the set infusion rate prior to each bag change, please record discrepancy and contact the physician for further instruction.

	IV bag or cassette change	• The IV bag or cassette must be changed at least every 96 hours by a healthcare professional for sterility reasons. • The IV bag change must occur within 4 hours of the designated time regardless of the remaining volume in the existing infusion bag.
	Therapy interruption	• Healthcare professional supervision or hospitalisation is recommended in instances where treatment is being re-initiated following an interruption of 4 or more hours.
	Catheter site care	• BLINCYTO solution is a preservative-free solution. Aseptic technique must always be adhered to when administering BLINCYTO. • Instruct the patients and caregivers on how to perform catheter site care as required

Counselling	Neurologic events	• It is essential to monitor patients for signs and symptoms of neurologic events (e.g. confusion, disorientation, dizziness, tremor, seizure) prior to treatment and throughout the treatment cycle including the treatment-free interval. **Should any of these signs and symptoms occur please ensure an urgent clinical assesment is obtained.**
		• Consider utilising a writing test periodically to support this monitoring and early detection of neurologic events.
		• Be aware that serious neurologic events have occurred at a higher frequency in elderly patients (≥ 65 years of age)
		• Counsel patients on the potential neurologic effects and advise patients:
		  • **Not to drive, use heavy machinery, or engage in hazardous activities while receiving BLINCYTO.**
		  • To contact you or the doctor if they experience neurologic symptoms.

	Cytokine Release Syndrome (CRS)	• Cytokine Release Syndrome (CRS) which may be life-threatening or fatal has been reported in patients receiving BLINCYTO. • It is essential to monitor patients closely for signs and symptoms of CRS (e.g pyrexia, asthenia, headache, hypotension, total bilirubin increased, and nausea, in some cases disseminated intravascular coagulation and capillary leak syndrome). **Should any of these signs and symptoms occur, please ensure an urgent clinical assesment is obtained.** • Advise patients to contact you or their doctor if they experience any unusual symptoms

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 Precautions and Dosage and Administration).*

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/m^2 (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. 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