

KEYTRUDA (pembrolizumab) whyceseting

אפריל 2024

רופא/ה יקר/ה רוקח/ת יקר/ה,

# הנדון: KEYTRUDA® 100 mg/4 mL מ"ג/ 4 מ"ל קיטרודה 100 מ"ג/ 4 מ"ל

Dosage form and Composition:

Pembrolizumab 100 mg/4 ml; Concentrate for Solution for Intravenous Infusion

חברת מרק שארפ ודוהם (ישראל-1996) בע"מ, (MSD ישראל), מבקשת ליידע על עדכון העלון לרופא ולצרכן של התכשיר Keytruda 100mg/4ml להכללת תוספת התוויה שאושרה.

<u>עדכונים מהותיים שבוצעו בעלון לרופא (</u>טקסט שהוסף לעלון לרופא מודגש בקו תחתון):

#### 1 THERAPEUTIC INDICATIONS

[...]

# 1.2 Non-Small Cell Lung Cancer

[...]

KEYTRUDA, as a single agent, is indicated as adjuvant treatment following resection and platinum-based chemotherapy for adult patients with Stage IB (T2a ≥4 cm), II, or IIIA NSCLC.

#### 2 DOSAGE AND ADMINISTRATION

[...]

## 2.3 Recommended Dosage for NSCLC

[...]

For adjuvant treatment:

The recommended dose of KEYTRUDA for the adjuvant treatment of adult patients with NSCLC is 200 mg administered as an intravenous infusion over 30 minutes every 3 weeks until disease recurrence, unacceptable toxicity, or for up to 12 months.

## 5 WARNINGS AND PRECAUTIONS

## 5.1 Severe and Fatal Immune-Mediated Adverse Reactions

[...]

# **Immune-Mediated Pneumonitis**

[...]

In a clinical study enrolling 580 adult patients with resected NSCLC (KEYNOTE 091) who received KEYTRUDA as a single agent for adjuvant treatment, pneumonitis occurred in 41 (7%) patients, including fatal (0.2%), Grade 4 (0.3%), and Grade 3 (1%) adverse reactions. Patients received high-dose corticosteroids for a median duration of 10 days (range: 1 day to 2.3 months). Pneumonitis led to discontinuation of KEYTRUDA in 26 (4.5%) of patients. Of the patients who developed pneumonitis, 54% interrupted KEYTRUDA, 63% discontinued KEYTRUDA, and 71% had resolution.

#### Immune-Mediated Endocrinopathies

[...]

## Thyroid Disorders

[...]

The incidence of new or worsening hyperthyroidism was higher in 580 patients with resected NSCLC, occurring in 11% of patients receiving KEYTRUDA as a single agent as adjuvant treatment (KEYNOTE-091), including Grade 3 (0.2%) hyperthyroidism.

[...]

The incidence of new or worsening hypothyroidism was higher in 580 patients with resected NSCLC, occurring in 22% of patients receiving KEYTRUDA as a single agent as adjuvant treatment (KEYNOTE-091), including Grade 3 (0.3%) hypothyroidism.

## 6 ADVERSE REACTIONS

[...]

## 6.1 Clinical Trials Experience

[...]





## **NSCLC**

[...]

## Adjuvant Treatment of Resected NSCLC

The safety of KEYTRUDA as a single agent was investigated in KEYNOTE-091, a multicenter, randomized (1:1), triple-blind, placebo-controlled trial in patients with completely resected Stage IB (T2a ≥4 cm), II, or IIIA NSCLC; adjuvant chemotherapy up to 4 cycles was optional [see Clinical Studies (14.2)]. A total of 1161 patients received KEYTRUDA 200 mg (n=580) or placebo (n=581) every 3 weeks. Patients were ineligible if they had active autoimmune disease, were on chronic immunosuppressive agents or had a history of interstitial lung disease or pneumonitis.

The median duration of exposure to KEYTRUDA was 11.7 months (range: 1 day to 18.9 months). Sixty-eight percent of patients in the KEYTRUDA arm were exposed to KEYTRUDA for ≥6 months.

The adverse reactions observed in KEYNOTE 091 were generally similar to those occurring in other patients with NSCLC receiving KEYTRUDA as a single agent, with the exception of hypothyroidism (22%), hyperthyroidism (11%), and pneumonitis (7%). Two fatal adverse reactions of myocarditis occurred.

#### 8 USE IN SPECIFIC POPULATIONS

[...]

## 8.5 Geriatric Use

[...]

Of 506 adult patients with Stage IB (T2a ≥4 cm), II, or IIIA NSCLC following complete resection and platinum-based chemotherapy who were treated with KEYTRUDA in KEYNOTE 091, 242 (48%) were 65 years and over. No overall differences in safety or effectiveness were observed between elderly patients and younger patients.

## 14 CLINICAL STUDIES

עדכונים בפרק

נוסף מידע לגבי ההתוויה Adjuvant treatment of resected NSCLC.

## <u>עדכונים מהותיים שבוצעו בעלון לצרכן</u> (טקסט שהוסף לעלון לצרכן מודגש בקו תחתון):

# 1. למה מיועדת קיטרודה?

[...]

סרטן ריאות מסוג סרטן הריאה של תאים שאינם-קטנים (NSCLC).

[...]

- <u>ניתן להשתמש בקיטרודה לבדה במבוגרים לטיפול בסרטן הריאה שלך:</u> •
- <u>כדי לסייע במניעת חזרה של סרטן הריאה שלך לאחר שהגידול/ים שלך הוסרו בניתוח וטופלת בכימותרפיה</u> <u>המכילה פלטינום, ו</u>
- י <u>יש לך סרטן ריאה של תאים שאינם-קטנים (NSCLC) בשלב IB והגידול/ים שלך הינם בגודל 4 ס"מ או יותר,</u> שלב II או שלב III<u>N.</u>

## ההתוויות המאושרות לתכשיר:

## <u>Melanoma</u>

- •KEYTRUDA (pembrolizumab) is indicated for the treatment of adult and pediatric (12 years and older) patients with unresectable or metastatic melanoma.
- •KEYTRUDA is indicated for the adjuvant treatment of adult and pediatric (12 years and older) patients with Stage IIB, IIC, or III melanoma following complete resection.

## Non-Small Cell Lung Cancer

- •KEYTRUDA, in combination with pemetrexed and carboplatin, is indicated for the first-line treatment of patients with metastatic nonsquamous non-small cell lung cancer (NSCLC) negative for EGFR or ALK genomic tumor aberrations.
- •KEYTRUDA, in combination with carboplatin and either paclitaxel or paclitaxel protein-bound, is indicated for the first-line treatment of patients with metastatic squamous NSCLC.
- •KEYTRUDA, as a single agent, is indicated for the treatment of patients with metastatic NSCLC whose tumors express PD-L1 [Tumor Proportion Score (TPS) ≥50%)] as determined by a validated test. Patients with EGFR or ALK genomic tumor aberrations should have disease progression on or after





platinum-containing chemotherapy and an approved therapy for these aberrations prior to receiving KEYTRUDA.

•KEYTRUDA, as a single agent, is indicated for the treatment of patients with advanced NSCLC whose tumors express PD-L1 as determined by a validated test, with disease progression on or after platinum containing chemotherapy. Patients with EGFR or ALK genomic tumor aberrations should have disease progression on approved therapy for these aberrations prior to receiving KEYTRUDA.

•KEYTRUDA, as a single agent, is indicated as adjuvant treatment following resection and platinum-based chemotherapy for adult patients with Stage IB (T2a ≥4 cm), II, or IIIA NSCLC.

## Head and Neck Cancer

- •KEYTRUDA, in combination with platinum and fluorouracil (FU), is indicated for the first-line treatment of patients with metastatic or with unresectable, recurrent head and neck squamous cell carcinoma (HNSCC).
- •KEYTRUDA, as a single agent, is indicated for the first-line treatment of patients with metastatic or with unresectable, recurrent HNSCC whose tumors express PD-L1 [Combined Positive Score (CPS) ≥1] as determined by a validated test.
- •KEYTRUDA, as a single agent, is indicated for the treatment of patients with recurrent or metastatic HNSCC with disease progression on or after platinum-containing chemotherapy.

## Classical Hodgkin Lymphoma

- •KEYTRUDA is indicated for the treatment of adult patients with relapsed or refractory classical Hodgkin lymphoma (cHL).
- •KEYTRUDA is indicated for the treatment of pediatric patients with refractory cHL, or cHL that has relapsed after 2 or more lines of therapy.

## Primary Mediastinal large B-Cell Lymphoma

KEYTRUDA is indicated for the treatment of adult and pediatric patients with refractory primary mediastinal large B-cell lymphoma (PMBCL), or who have relapsed after 2 or more prior lines of therapy.

Limitation of Use: KEYTRUDA is not recommended for treatment of patients with PMBCL who require urgent cytoreductive therapy.

## **Urothelial Carcinoma**

- •KEYTRUDA is indicated for the treatment of patients with locally advanced or metastatic urothelial carcinoma who are not eligible for cisplatin-containing chemotherapy and whose tumors express PD-L1 [Combined Positive Score (CPS ≥10)] as determined by a validated test, or in patients who are not eligible for any platinum-containing chemotherapy regardless of PD-L1 status.
- •KEYTRUDA is indicated for the treatment of patients with locally advanced or metastatic urothelial carcinoma who have disease progression during or following platinum-containing chemotherapy or within 12 months of neoadjuvant or adjuvant treatment with platinum-containing chemotherapy.

## Microsatellite Instability-High Cancer

KEYTRUDA is indicated for the treatment of adult and pediatric patients with unresectable or metastatic, microsatellite instability-high (MSI H) or mismatch repair deficient (dMMR).

•solid tumors that have progressed following prior systemic treatment and who have no satisfactory alternative treatment options,

or

•colorectal cancer that has progressed following treatment with a fluoropyrimidine, oxaliplatin, and irinotecan.

Limitation of Use: The safety and effectiveness of KEYTRUDA in pediatric patients with MSI H central nervous system cancers have not been established.

## Gastric Cancer

•KEYTRUDA, in combination with trastuzumab, fluoropyrimidine and platinum-containing chemotherapy, is indicated for the first-line treatment of locally advanced unresectable or metastatic HER2-positive gastric or gastro-oesophageal junction (GEJ) adenocarcinoma in adults whose tumors express PD-L1 with a CPS ≥1.





## **Cervical Cancer**

- •KEYTRUDA, in combination with chemotherapy, with or without bevacizumab, is indicated for the treatment of patients with persistent, recurrent, or metastatic cervical cancer whose tumors express PD-L1 (CPS ≥1) as determined by a validated test.
- •KEYTRUDA, as a single agent, is indicated for the treatment of patients with recurrent or metastatic cervical cancer with disease progression on or after chemotherapy whose tumors express PD-L1 (CPS ≥1) as determined by a validated test.

## Biliary Tract Cancer

KEYTRUDA, in combination with gemcitabine and cisplatin, is indicated for the treatment of patients with locally advanced unresectable or metastatic biliary tract cancer (BTC).

## Merkel Cell Carcinoma

KEYTRUDA is indicated for the treatment of adult and pediatric patients with recurrent locally advanced or metastatic Merkel cell carcinoma (MCC).

## Renal Cell Carcinoma

- •KEYTRUDA, in combination with axitinib, is indicated for the first-line treatment of adult patients with advanced renal cell carcinoma (RCC).
- •KEYTRUDA, in combination with lenvatinib, is indicated for the first-line treatment of adult patients with advanced RCC.
- •KEYTRUDA is indicated for the adjuvant treatment of patients with RCC at intermediate-high or high risk of recurrence following nephrectomy, or following nephrectomy and resection of metastatic lesions.

## Non-Muscle Invasive Bladder Cancer (NMIBC)

KEYTRUDA is indicated for the treatment of patients with Bacillus Calmette-Guerin (BCG)-unresponsive, high-risk, non-muscle invasive bladder cancer (NMIBC) with carcinoma in situ (CIS) with or without papillary tumors who are ineligible for or have elected not to undergo cystectomy.

## Esophageal Cancer

- •KEYTRUDA is indicated for the treatment of patients with locally advanced or metastatic esophageal or gastroesophageal junction (GEJ) (Siewert type I) carcinoma that is not amenable to surgical resection or definitive chemoradiation in combination with platinum- and fluoropyrimidine-based chemotherapy.
- •KEYTRUDA is indicated for the treatment of patients with recurrent locally advanced or metastatic squamous cell carcinoma of the esophagus whose tumors express PD-L1 (CPS ≥10) as determined by a validated test, with disease progression after one or more prior lines of systemic therapy.

## Cutaneous Squamous Cell Carcinoma

KEYTRUDA is indicated for the treatment of patients with recurrent or metastatic cutaneous squamous cell carcinoma (cSCC) or locally advanced cSCC that is not curable by surgery or radiation.

#### Microsatellite Instability-High or Mismatch Repair Deficient Colorectal Cancer (CRC)

KEYTRUDA is indicated for the first-line treatment of patients with unresectable or metastatic MSI-H or dMMR colorectal cancer (CRC).

## Tumor Mutational Burden-High Cancer

KEYTRUDA is indicated for the treatment of adult and pediatric patients with unresectable or metastatic tumor mutational burden-high (TMB-H) [≥10 mutations/megabase (mut/Mb)] solid tumors, as determined by a validated test, that have progressed following prior treatment and who have no satisfactory alternative treatment options.

Limitations of Use: The safety and effectiveness of KEYTRUDA in pediatric patients with TMB-H central nervous system cancers have not been established.

## Triple negative breast cancer

- •KEYTRUDA, in combination with chemotherapy, is indicated for the treatment of patients with locally recurrent unresectable or metastatic triple negative breast cancer (TNBC) whose tumors express PD-L1 (CPS ≥10) as determined by a validated test.
- •KEYTRUDA is indicated for the treatment of patients with high risk early stage triple negative breast cancer (TNBC) in combination with chemotherapy as neoadjuvant treatment, and then continued as a single agent as adjuvant treatment after surgery.





## Endometrial carcinoma

Keytruda, in combination with lenvatinib, is indicated for the treatment of advanced or recurrent endometrial carcinoma in adults who have disease progression on or following prior treatment with a platinum containing therapy and who are not candidates for curative surgery or radiation.

למידע מלא ולהוראות מתן מפורטות, יש לעיין בעלון לרופא ולצרכן המאושרים על ידי משרד הבריאות.

העלונים לרופא ולצרכן נשלחו לפרסום במאגר התרופות שבאתר משרד הבריאות, וניתן לקבלם מודפסים על ידי פניה לבעל הרישום, חברת MSD, בטלפון 09-9533333.

מופצת ע"י חברת נובולוג בע"מ. Keytruda 100mg/4ml

בברכה, דורית מאורי רוקחת ממונה MSD ישראל

References: Keytruda\_100mg\_4ml-SPC-04-2024a Keytruda\_100mg\_4ml-PIL-HEB-04-2024a