



FOM GUIDE TO DISEASE MANAGEMENT

FAQ on CML

Focus on 3rd Gen TKI



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The Max Foundation
Accelerating health equity, one patient at a time.



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Frequently Asked Questions on CML

Focus on 3rd Generation TKI

Specially compiled for
Friends of Max

Editor's Note

We all know that the introduction of TKI (Tyrosine Kinase Inhibitors) in the treatment of Chronic Myeloid Leukaemia (CML) has dramatically improved patient survival rates. Today, CML is considered a chronic disease with patients not only receiving extension of life but also quality of life.



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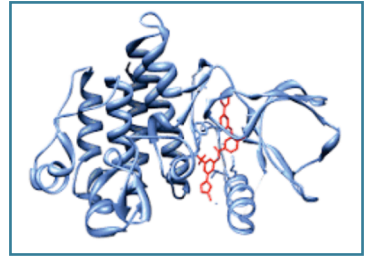
The third-generation TKI, Ponatinib (Iclusig, marketed by Takeda Oncology), was approved almost 10 years ago for the treatment of adults in Chronic, Accelerated or Blast Phase Ph+ CML who were resistant to, or intolerant of, the other TKIs. It was also approved for those with the T315I mutation, which is known to be involved in resistance to Imatinib, Nilotinib, Dasatinib and Bosutinib.

This booklet brought out by The Max Foundation Team in India for their patient support group arm Friends of Max tries to address some basic questions patients may have on the management of their condition with Ponatinib as and when the need may arise. I am happy to edit it and I hope the answers presented here helps to a better understanding of both the management of the disease and the specific issues related to the drug.

The drug is not yet marketed commercially in the region and thanks to The Max Foundation's collaboration with the company, there are a few patients currently receiving Ponatinib on compassionate grounds.

Q.1 What are TKI drugs

A tyrosine kinase inhibitor (TKI) is a drug that inhibits enzymes tyrosine kinases that are present in human body. These enzymes are responsible for the activation of many proteins required in our body.



Q.2 What type of drug is Ponatinib?

Ponatinib is a 3rd generation tyrosine kinase inhibitor that comes with brand name of Iclusig.

Q.3 What is Ponatinib used for?

Ponatinib is used for the treatment of chronic myeloid leukaemia-CML and Philadelphia positive acute lymphoblastic leukaemia- Ph+ ALL).

Q.4 When should Ponatinib be prescribed?

- Adult patients (more than 18 years of age)
- Chronic phase (CP) chronic myeloid leukemia (CML) with resistance or intolerance to at least two prior kinase inhibitors
- Accelerated phase (AP) or blast phase (BP) CML or Philadelphia chromosome positive acute lymphoblastic leukemia (Ph+ ALL) for whom no other kinase inhibitors are indicated
- T315I-positive CML (chronic phase, accelerated phase, or blast phase) or T315I-positive Ph+ ALL

Q.5 What is T315I mutation?

In some patients of CML on first and second generation TKI, the cancer cells develop a genetic change in them leading to ineffectiveness of these drugs. The third generation Ponatinib is remarkably effective against this change.

Q.6 Is Ponatinib a chemotherapy drug?

No, it is called a targeted drug.

Q.7 What is the recommended dosage?

Recommended Dose for Chronic Myelogenous Leukaemia:

Initial Dose: 45 mg orally once a day

However, the optimal dose has not been identified. The starting dose in clinical trials was 45 mg once a day; however, most patients tolerate either 30 mg or 15 mg once a day

Q.8 How should Ponatinib be taken?

Ponatinib is usually taken once daily, with or without food. It is generally swallowed as a whole and not crushed.

Q.9 What happens if I miss a dose?

Take the medicine as soon as you can but skip the missed dose if it is almost time for your next dose. Do not take two doses at one time.

Q.10 What happens if I overdose?

Seek emergency medical attention

Q.11 What are dietary restrictions if any?

Grapefruit may interact with Ponatinib and lead to unwanted side effects. Avoid the use of grapefruit products.

Q.12 What are the common side effects of Ponatinib?

Vascular events (thrombosis of arteries or veins), hypertension, rash, abdominal pain, fatigue, headache, arterial ischemia, dry skin, constipation, arthralgia, nausea, pyrexia, peripheral neuropathy, myalgia, pain in extremity, back pain and diarrhoea

Q.13 Is there any critical side effect to be aware of?

■ Get emergency medical help if you have signs of an allergic reaction to Ponatinib:

- Hives; difficulty in breathing; swelling of face, lips, tongue, or throat.
- Ponatinib may cause heart or blood vessel problems that could lead to heart attack or stroke. Call your doctor right away or get emergency medical help if you have:
- Symptoms of a heart attack - chest pain or pressure, pain spreading to your jaw or shoulder, feeling short of breath;
- Signs of a stroke - sudden numbness or weakness (especially on one side of the body), sudden severe headache, slurred speech, problems with vision or balance; or
- Signs of a blood clot - severe stomach pain, pain or swelling in your arms or legs, coughing up blood.

■ Call your doctor at once if you have:

- Dizziness, confusion, headache, change in mental status
- A seizure
- Swelling, rapid weight gain, feeling short of breath
- A wound that will not heal
- Eye problems - vision problems, eye pain or swelling, bleeding in the eye, increased sensitivity to light, flashes of light or "floaters" in your vision
- Heart problems - chest pain, shortness of breath, fast or pounding heartbeats, feeling like you might pass out
- A hole or tear in your stomach or intestine - severe pain or swelling in your stomach with a high fever
- Low blood cell counts - fever, chills, tiredness, mouth sores, skin sores, easy bruising, unusual bleeding, pale skin, cold hands and feet
- Nerve problems - muscle weakness, trouble moving your eyes or other parts of your face, tingling, burning pain, numbness in your hands and feet
- Severe bleeding - nosebleeds, bloody or tarry stools, pink or brown urine, heavy menstrual periods, coughing up blood or vomit that is bloody or looks like coffee grounds

- Signs of liver or pancreas problems - loss of appetite, upper stomach pain (that may spread to your back), nausea or vomiting, fast heart rate, dark urine, jaundice (yellowing of the skin or eyes).

Q.14 What should a female patient should be concerned about?

- You may need to have a negative pregnancy test before starting this treatment.
- Ponatinib may harm an unborn baby. Use effective birth control to prevent pregnancy while you are using this medicine and for at least 3 weeks after your last dose.
- This medicine may affect fertility (ability to have children) in women. However, it is important to use birth control to prevent pregnancy because Ponatinib can harm an unborn baby.
- One should not breastfeed while using Ponatinib and for at least 6 days after your last dose.

Q.15 Has any generic version of Ponatinib been approved?

There are a few generic versions of Ponatinib available, however, the generic versions are not approved yet by any country. Follow the advice of your health care provider.

Q.16 Is Ponatinib available in India?

Not yet. However, The Max Foundation is helping a few patients to access Ponatinib on compassionate grounds from the manufacturers free of cost.

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