Education, Adherence and Symptom Management in Patients with Cervix Cancer Treated with ADC Therapy

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Most Common Treatment-Related Adverse Events\textsuperscript{a}

- Grade 5 TRAEs occurred in 2 (0.8\%) and 1 (0.4\%) patients in the tisotumab vedotin and IC chemotherapy arms, respectively\textsuperscript{b}
- Median relative dose intensity was 96.1\% and 90.0\% in the tisotumab vedotin and IC chemotherapy arms, respectively

\textsuperscript{a}TRAEs listed are those occurring in ≥15\% of patients on either arm; \textsuperscript{b}Grade 5 TRAEs included acute kidney injury (n=1) and Stevens-Johnson syndrome (n=1) in the tisotumab vedotin arm and pancytopenia (n=1) in the IC chemotherapy arm.
AESIs in ≥5% of Patients in the Tisotumab Vedotin Arm

• Overall, the incidence of any grade TRAEs was similar across both arms (tisotumab vedotin: 87.6% versus chemotherapy: 85.4%)
  o 58.4% of TRAEs experienced by patients on the tisotumab vedotin arm were Grades 1-2
• Treatment-related AESIs for tisotumab vedotin were consistent with the previous known safety profile, including ocular, peripheral neuropathy, and bleeding events¹
  o There were no Grade 4-5 AESIs

AESI, adverse event of special interest
TV: FDA Approval with Black Box Warning

Black Box Warnings:

- Ocular toxicity

- Causes changes in corneal epithelium and conjunctiva resulting in vision changes, including severe vision loss, and corneal ulceration

- Conduct ophthalmic examination at baseline, prior to each dose, and as clinically indicated

- Adhere to premedication and required eye care before, during, and after infusion

- Withhold until improvement and resume, reduce the dose, or permanently discontinue, based on severity
Patient Adherence

• **Access to eye care providers** - set up patients with ophthalmologist

• **Access to eye drops** - make sure they can fill the scripts and bring to clinic prior to initiating treatment

• **Care during infusion** - instruct infusion staff how to manage eye care (eye drops/ice pack before during and after infusion)
Eye Drops/Eye Care Plan

Steroid Eye Drops
• Provide protection against erythema, edema and pruitus
• 10 minutes prior to infusion and the 2x per day on day of treatment, then 3x per day for 3 days post treatment

Vasoconstrictor Eye Drops
• Reduces blood flow in the eyes
• Right before infusion

Lubricating Eye Drops
• Helps reduce and relieve dryness/discomfort
• Use throughout the duration of treatment and for 30 days after your last dose

Ice packs
• Apply to both eyes after administration of vasoconstrictor eye drops, change often during infusion and keep cold pack on for 20 minutes after infusion
Symptom Management: Tisotumab Vedotin

**Eye toxicity:** Exam, drops, ice packs, self assessments

**Peripheral Neuropathy:** Assess baseline prior to starting, trial of regional cooling of hands/feet, trial of Gabapentin or Duloxetine

**Bleeding:** Monitor source and amount of bleeding, monitor CBC

**Nausea:** Antinausea medication such as ondansetron or olanzapine, ginger candy, teas

**Anorexia:** Smaller meals often, avoid spicy/fried food

**Fatigue:** Rest periods as needed, daily exercise routine, improve sleep at night
Tisotumab Vedotin: Eye Toxicity

Eye with conjunctivitis

Lining of eye (conjunctiva)
Keratitis

• Symptoms of keratitis include:
  • Red eyes
  • Pain and irritation in the affected eye
  • Vision changes, such as blurriness or inability to see
  • Sensitivity to light
  • Inability to open your eye
  • Eye discharge
  • Excessive tearing
HER2 Targeted ADC- Trastuzumab Deruxtecan

- Another ADC with potential benefit in the treatment of GYN cancers (NCCN listed but not FDA approved)
- Was reviewed in the Phase 2 Destiny-PanTumor02 Study
- Increased risk of ILD Pneumonitis
- Other AE may include Nausea/Vomiting/Diarrhea/Loss of Appetite/Alopecia
## Phase 2 DESTINY-PanTumor02 Study

<table>
<thead>
<tr>
<th>Adverse event</th>
<th>Cervical cancer (n = 40)</th>
<th>Endometrial cancer (n = 40)</th>
<th>Ovarian cancer (n = 40)</th>
<th>Biliary tract cancer (n = 41)</th>
<th>Pancreatic cancer (n = 25)</th>
<th>Bladder cancer (n = 41)</th>
<th>Other tumors (n = 40)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drug-related AE, %</td>
<td>90.0</td>
<td>90.0</td>
<td>85.0</td>
<td>80.5</td>
<td>60.0</td>
<td>92.7</td>
<td>85.0</td>
</tr>
<tr>
<td>Grade ≥3</td>
<td>47.5</td>
<td>35.0</td>
<td>52.5</td>
<td>39.0</td>
<td>28.0</td>
<td>41.5</td>
<td>37.5</td>
</tr>
<tr>
<td>Leading to discontinuation</td>
<td>7.5</td>
<td>7.5</td>
<td>2.5</td>
<td>12.2</td>
<td>4.0</td>
<td>9.8</td>
<td>15.0</td>
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<tr>
<td>Associated with death</td>
<td>0</td>
<td>5.0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>2.4</td>
<td>2.5</td>
</tr>
</tbody>
</table>

**Most common drug-related AEs (>10% of total patients), No. (%)**

<table>
<thead>
<tr>
<th>Adverse event</th>
<th>Total Patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nausea</td>
<td>65.0</td>
</tr>
<tr>
<td>Diarrhea</td>
<td>37.5</td>
</tr>
<tr>
<td>Vomiting</td>
<td>25.0</td>
</tr>
<tr>
<td>Decreased appetite</td>
<td>17.5</td>
</tr>
<tr>
<td>Alopecia</td>
<td>20.0</td>
</tr>
</tbody>
</table>

Drug-related AEs led to discontinuation in 8.6% of patients and to dose reduction in 20.2% of patients.
Incidence of ILD Pneumonitis

• A review of 14 studies totaling 1193 patients receiving the drug for a variety of advanced solid malignancies

• The overall incidence of all-grade ILD/pneumonitis was 11.4 percent, and the majority of cases (79 percent) were grade 1 or 2

• Grade 5 (fatal) toxicity occurred in 13 of the 122 cases (10.7 percent)
Take Aways

• Easy to miss, can progress rapidly
• Risk for ILD increased with exposure to immunotherapies?
• Any suspicion on imaging warrants further workup
• Hold treatment until resolves to grade 0
ADCs Are Here To Stay

Close Monitoring

And

Proactive Management of Adverse Events

CAN EQUAL

SUCCESS FOR OUR PATIENTS