

## Regimen Reference Order – GAST – PANitumumab + encorafenib

ARIA: GAST - [PANitumumab + encorafenib]

**Planned Course:** encorafenib once daily with PANitumumab every 14 days until disease progression or unacceptable toxicity (1 cycle = 28 days)

**Indication for Use:** Colorectal Cancer Metastatic, BRAF V600E Mutation Positive

**CVAD:** At Provider’s Discretion

<p><b><u>Proceed with treatment if:</u></b></p> <p><b>encorafenib</b></p> <p><b>Days 1 and 15 of every cycle</b></p> <ul style="list-style-type: none"> <li>• <b>ANC equal to or greater than <math>1.5 \times 10^9/L</math> AND Platelets equal to or greater than <math>100 \times 10^9/L</math></b></li> <li>• <b>AST/ALT less than 3 times the upper limit of normal</b></li> <li>• <b>Total bilirubin less than 2 times the upper limit of normal</b></li> </ul> <p><b>PANitumumab</b></p> <ul style="list-style-type: none"> <li>• <b>On Day 1, proceed with PANitumumab only when encorafenib starts</b></li> <li>• <b>On subsequent treatment days, proceed with PANitumumab regardless of CBC</b></li> </ul> <p style="margin-left: 20px;">❖ <b>Contact Physician if parameters not met</b></p>
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### SEQUENCE OF MEDICATION ADMINISTRATION

Pre-treatment Requirements		
Drug	Dose	CCMB Administration Guideline
Not Applicable		

Treatment Regimen – GAST – PANitumumab + encorafenib		
Establish primary solution 500 mL of: normal saline		
Drug	Dose	CCMB Administration Guideline
encorafenib	300 mg	Orally once daily on <b>Days 1 to 28</b> Take with or without food. Swallow whole <b>(Self-administered at home)</b> <i>*Alert: encorafenib dose may be adjusted pending evaluation of Day 15 blood work</i>
<b>Days 1 and 15</b>		
PANitumumab	6 mg/kg	IV in normal saline 100 mL over 1 hour If first dose of PANitumumab is tolerated, then subsequent infusions may be administered over 30 minutes Doses greater than 1000 mg must be infused over 90 minutes <i>Use 0.2 or 0.22 micron filter</i>

All doses will be automatically rounded that fall within CCMB Approved Dose Bands. See Dose Banding document for more information

**encorafenib (BRAFTOVI®) available dosage strength: 75 mg capsule**  
**Classification: Cytotoxic, Hazardous**

In the event of an infusion-related hypersensitivity reaction, refer to the 'Hypersensitivity Reaction Standing Order'

## REQUIRED MONITORING

### Cardiac monitoring

- EKG at baseline and as clinically indicated

### All Cycles

#### Days 1 and 15

- CBC, serum creatinine, urea, electrolytes including magnesium and calcium, liver enzymes, total bilirubin, glucose and albumin as per Physician Orders
- Full vital signs (temperature, heart rate, respiratory rate, blood pressure and O<sub>2</sub> saturation) at baseline and as clinically indicated

## Recommended Support Medications

Drug	Dose	CCMB Administration Guideline
doxycycline	100 mg	Orally twice daily as directed by clinic
hydrocortisone cream	1%	Apply topically daily at bedtime to face, hands, feet, neck, back and chest as directed by clinic
Sunscreen	Broad-spectrum, Minimum SPF 15 (PABA free, zinc oxide or titanium dioxide preferred)	Apply liberally to exposed skin 30 minutes before going outdoors. Reapply every 2 hours and after swimming
Moisturizing lotion	Fragrance-free	Apply topically to face, hands, feet, neck, back and chest daily in the morning on rising and <b><i>as needed</i></b>

## DISCHARGE INSTRUCTIONS

- Patients should be instructed to contact their cancer team immediately if symptoms of hypersensitivity reactions occur after discharge
- Instruct patient to report rash and skin changes to clinic
- Patients should report signs and symptoms of bleeding/hemorrhage
- Instruct patient to use recommended support medications
- encorafenib has potential for significant drug-drug interactions. Patients should notify clinic prior to starting any new medication
- Avoid grapefruit and grapefruit juice, Seville oranges (i.e. orange marmalade) and starfruit
- Reinforce applicable safe handling precautions of medications, blood and body fluids while on encorafenib

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**ADDITIONAL INFORMATION**

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- encorafenib can prolong QT interval
- encorafenib has been associated with the development of new primary malignancies (cutaneous and non-cutaneous)
- PANitumumab AND encorafenib have been associated with ocular toxicity
- PANitumumab AND encorafenib can cause hypomagnesemia
- PANitumumab AND encorafenib can cause dermatological changes including rash and hand and foot syndrome
- PANitumumab can cause interstitial lung disease, pneumonitis and exacerbation of pre-existing fibrotic lung disease
- PANitumumab can cause nail changes
- encorafenib will be dispensed by CCMB Pharmacy