Regimen Reference Order - CUTA - encorafenib + binimetinib

ARIA: CUTA - [encorafenib + binimetinib]

Planned Course: Until disease progression or unacceptable toxicity (1 cycle = 30 days)

Indication for Use: Melanoma BRAF mutation positive, Metastatic

Proceed with treatment if:

- ANC equal to or greater than 1.2 x $10^9/L$ AND Platelets equal to or greater than $100 \times 10^9/L$
- Total bilirubin less than 1.5 times upper limit of normal

If binimetinib is held for toxicity, contact oncologist for direction on encorafenib dose reduction

Contact Physician if parameters not met

SEQUENCE OF MEDICATION ADMINISTRATION

Pre-treatment Requirements				
Drug	Dose	CCMB Administration Guideline		
Not Applicable				

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Drug	Dose	CCMB Administration Guideline
encorafenib	450 mg*	Orally once daily with or without food Take at the same time as morning dose of binimetinib Swallow whole (Self-administered at home)
binimetinib	45 mg	Orally twice daily with or without food Swallow whole (Self-administered at home)

^{*}If binimetinib is held for toxicity, single agent encorafenib should be reduced to a maximum of 300 mg once daily until binimetinib is resumed

encorafenib (BRAFTOVI®) available dosage strength: 75 mg capsule

Classification: Cytotoxic, Hazardous

binimetinib (MEKTOVI®) available dosage strength: 15 mg tablet

Classification: Cytotoxic, Hazardous



Updated: December 30, 2022

REQUIRED MONITORING

Cardiac monitoring

- EKG and Left Ventricular Ejection Fraction (LVEF) monitoring recommended
 - At baseline
 - Every 3 to 6 months during treatment at the physician's discretion

All Cycles

- CBC, serum creatinine, electrolytes, liver enzymes, total bilirubin, blood glucose and creatinine phosphokinase (CK) as per Physician Orders
- · Clinical ocular and skin toxicities assessment
- Full vital signs (temperature, heart rate, respiratory rate, blood pressure and O₂ saturation) with each clinic visit

Recommended Support Medications				
Drug	Dose	CCMB Administration Guideline		
None required				

INSTRUCTIONS FOR PATIENT

- binimetinib doses should be taken approximately 12 hours apart
- Patients should report signs and symptoms of bleeding/hemorrhage
- encorafenib and binimetinib can cause cutaneous and ocular toxicities. Patient should be instructed to notify clinic if they experience rash or eye problems
- This regimen has potential for 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 during encorafenib and binimetinib treatment

ADDITIONAL INFORMATION

- This regimen has been associated with venous thromboembolism (VTE) events
- encorafenib and binimetinib can prolong QT interval and cause left ventricular dysfunction
- · binimetinib has been associated with interstitial lung disease and pneumonitis
- binimetinib can cause hypertension
- rhabdomyolysis has been reported with binimetinib
- encorafenib has been associated with the development of new primary malignancies (cutaneous and non-cutaneous)
- encorafenib and binimetinib will be dispensed by CCMB Pharmacy

