

For the Patient: **SMAVVC**

Other Names: Treatment of BRAF V600 Mutation-Positive Unresectable or Metastatic Melanoma Using Vemurafenib and Cobimetinib

SM = **S**kin and **M**elanoma

AV = Advanced

VC = **V**emurafenib and **C**obimetinib

ABOUT THIS MEDICATION

What is this drug used for?

- Vemurafenib (vem" ue raf' e nib) and cobimetinib (KOE-bi-ME-ti-nib) is a drug combination that is used to treat a type of skin cancer called melanoma,
 - that has spread to other parts of the body or cannot be removed by surgery, and
 - that has a certain type of abnormal "BRAF" gene.

How does this drug work?

 Vemurafenib and cobimetinib target proteins made from the abnormal BRAF and MEK genes, respectively, and slows down or stops the growth of cancer cells.

INTENDED BENEFITS

 Vemurafenib and cobimetinib are being given to destroy and/or limit the growth of melanoma cells. It may improve your current symptoms, and delay or prevent the onset of new ones.

TREATMENT SUMMARY

How are these drugs given?

- Vemurafenib and cobimetinib are tablets that you take by mouth.
- Vemurafenib is taken twice daily continuously, cobimetinib is taken once daily for 21 days, followed by a 7 day break, as long as you are benefiting from treatment and not having too many side effects.

What will happen when I get my drugs?

- "BRAF" gene test of your cancer is done before starting treatment.
- A blood test (lab work) and other tests are done before starting treatment and each time you see your oncologist.
- The dose of either drug may be changed or interrupted based on your test results and/or side effects

BC Cancer Protocol Summary (Patient Version) SMAVVC Developed: 1 Sep 2017 Revised: 1 Jul 2020

INSTRUCTIONS FOR THE PATIENT

How should I store this drug?

• **Store** Vemurafenib and cobimetinib tablets out of the reach of children, at room temperature, away from heat, light, and moisture.

How should I take this drug?

- Vemurafenib is taken twice daily, in the morning and in the evening, approximately 12 hours apart.
 - Cobimetinib is taken once daily at about the same time everyday with either the morning or evening dose of vemurafenib.
- You take vemurafenib and cobimetinib consistently with or without food.
- Do not chew or crush vemurafenib and cobimetinib tablets. Swallow whole with a full glass of water one at a time.
- If you miss a dose of vemurafenib, take it as soon as you can if it is within 8 hours of the missed dose. If it is more than 8 hours since your missed dose, skip the missed dose and go back to your usual dosing times.
 If you miss a dose of cobimetinib, take it as soon as you can if it is within 12 hours of the missed dose. If it is more than 12 hours since your missed dose, skip the missed dose and go back to your usual dosing times. Do not take a double dose to make up for the missed dose.
- If you vomit the dose of vemurafenib and/or cobimetinib, skip the dose and go back to your usual dosing times. Do NOT repeat the dose. Let your doctor know as a medication to prevent nausea may be required for future doses.

What other drugs or foods can interact with vemurafenib and cobimetinib?

- Other drugs such as warfarin (COUMADIN®), certain antibiotics and anti-fungal agents, the herbal product St. John's Wort, seizure medications, and medicines for heart rhythm problems (i.e., quinidine, amiodarone, beta blockers) may interact with vemurafenib and/or cobimetinib. Tell your doctor or pharmacist if you are taking this or any other drugs as you may need extra blood tests or your dose may need to be changed. Check with your doctor or pharmacist before you start or stop taking any other drugs.
- The drinking of alcohol (in small amounts) does not appear to affect the safety or usefulness of vemurafenib and cobimetinib.
- Avoid grapefruit and grapefruit juice for the duration of your treatment, as these may interact with vemurafenib and cobimetinib.

Other important things to know:

Before you start taking vemurafenib and cobimetinib, talk to your doctor or pharmacist if you have any of the following:

Heart problems such as heart failure, valve problems or problems in the way your heart beats, including a condition called long QT syndrome.

Eye problems including blockage of the vein draining the eye or swelling in the eye which may be caused by fluid blockage.

Skin problems including rash or acne-like rash.

Lung or **breathing problems** including difficulty in breathing often accompanied by a dry cough, shortness of breath and fatigue.

High blood pressure (hypertension) or **elevated blood sugar** levels (diabetes). **Liver** or **kidney problems**.

Have or have had **blood clots** or **bleeding problems**.

A low number of white blood cells (neutropenia).

- Vemurafenib and cobimetinib may damage sperm and may harm the baby if used during pregnancy. It is best to use **birth control** while being treated and for 6 months after treatment. Tell your doctor right away if you or your partner becomes pregnant. Do not breastfeed during treatment.
- **Tell** doctors or dentists that you are being treated with vemurafenib and cobimetinib before you receive any treatment from them.

SIDE EFFECTS AND WHAT TO DO ABOUT THEM

Are there any risks?

Unexpected and unlikely side effects can occur with any drug treatment. The ones listed below are particularly important for you to be aware of as they are directly related to the common actions of the drugs in your treatment plan.

SERIOUS SIDE EFFECTS	How common is it?	MANAGEMENT
Skin cancer called cutaneous squamous cell carcinoma (cuSCC) may rarely occur.	Rare	Check your skin and tell your oncologist right away about any skin changes including a: • new wart • skin sore or reddish bump that bleeds or does not heal • change in size or color of a mole Cutaneous squamous cell carcinoma is typically managed with simple excision.
Eye (vision) problems may rarely occur. Signs include seeing flashes of light, colour or black dots, blurred outline around objects (halo), partial loss of vision.	Rare	Report any changes in vision to your doctor as soon as possible.
Abnormal heart rhythm (QT or PR prolongation), beating or heart failure may rarely occur. Signs include feeling like heart is pounding, racing or beating irregularly, dizziness, tiredness, feeling lightheaded, shortness of breath, swelling in legs.	Rare	Minimize your risk of abnormal heart rhythm by: • always checking with your pharmacist and doctor about drug interactions when starting a new medication, herbal product, or supplement Contact your doctor <i>immediately</i> or get emergency help if your heart is beating irregularly or fast, or if you feel faint, lightheaded, or dizzy.

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SERIOUS SIDE EFFECTS	How common is it?	MANAGEMENT
Rhabdomyolysis: muscle pain that you cannot explain, muscle tenderness or weakness, generalized weakness (especially if you don't feel well), brown or discoloured urine.	Rare	Report any signs to your doctor as soon as possible.
Reactions at sites of radiation (radiation sensitization and recall) including: Severe skin reactions (skin rash, blistering, peeling or discoloration of the skin)	Rare	Avoid radiation therapy during treatment with vemurafenib and cobimetinib unless advised by your oncologist.

OTHER SIDE EFFECTS	How common is it?	MANAGEMENT
Diarrhea may occur.	Common	 If diarrhea is a problem: Drink plenty of fluids. Eat and drink often in small amounts. Avoid high fibre foods as outlined in Food Ideas to Help Manage Diarrhea.*
Muscle, limb, or joint pain may commonly occur.	Common	You may take acetaminophen (e.g., TYLENOL®) every 4-6 hours to a maximum of 4 g (4000 mg) per day or ibuprofen (e.g., ADVIL®) for mild to moderate pain. Tell your doctor if the pain interferes with your activity.

OTHER SIDE EFFECTS	How common is it?	MANAGEMENT
Hair loss may sometimes occur. Hair will grow back once you stop treatment. Colour and texture may change.	Sometimes	 Use a gentle shampoo and soft brush. Care should be taken with use of hair spray, bleaches, dyes and perms. If hair loss is a problem, refer to For the Patient: Hair Loss Due to Chemotherapy*.
Tiredness and lack of energy may sometimes occur.	Sometimes	 Do not drive a car or operate machinery if you are feeling tired. Try the ideas in Your Bank to Energy Savings: Helping People with Cancer Handle Fatigue.*
Skin rashes or dry skin may sometimes occur. Acne-like rash, redness of the face, itching skin.	Sometimes	 If rash is accompanied by signs of an allergic reaction such as flushing, dizziness, swelling, or breathing problems, call your doctor immediately. If rash or itching is very irritating, call your doctor. Otherwise, be sure to mention it at your next visit.
Your skin may sunburn more easily than usual.	Sometimes	 To help prevent sunburn: Avoid unnecessary exposure to UV light including sunlight, tanning beds, and sun lamps. When outside, cover up with a long-sleeved shirt, long pants or skirt and a broad-brimmed hat made out of tightly woven, dark coloured fabric. Use a broad-spectrum sunscreen (protects against both UVA and UVB) that has a sun protection factor (SPF) of at least 30. Refer to Your Medication Sun Sensitivity and Sunscreens* or the BC Health Guide for more information. After sun exposure, if you have severe sunburn or skin reaction such as itching, rash, or swelling, contact your doctor.

OTHER SIDE EFFECTS	How common is it?	MANAGEMENT
Nausea and vomiting may sometimes occur after your treatment. Most people have little or no nausea.	Sometimes	You may be given a prescription for antinausea drug(s) to take at home. It is easier to prevent nausea than treat it once it has occurred, so follow directions closely.
		Drink plenty of fluids.
		Eat and drink often in small amounts.
		Try the ideas in Food Choices to Help Control Nausea.*
Headache may sometimes occur.	Sometimes	Take acetaminophen (e.g., TYLENOL®) every 4-6 hours if needed, to a maximum of 4 g (4000 mg) per day.
Fever may sometimes occur.	Sometimes	Call your doctor as soon as possible for advice if over 38°C (100.4° F) by an oral thermometer. You may need to hold the treatment during fever and/or reduce the dose.
		• if instructed to do so: take acetaminophen (e.g., TYLENOL®) every 4-6 hours, to a maximum of 4 g (4000 mg) per day.
		If you have fever (over 38°C by an oral thermometer) plus another sign of infection, call your doctor <i>immediately</i> . Other signs of infection include chills, cough, or burning when you pass urine.
Loss of appetite may sometimes occur.	Sometimes	Try the ideas in Food Ideas to Help with Decreased Appetite.*
Swelling of hands, feet, or lower legs	Sometimes	If swelling is a problem:
may sometimes occur if your body retains extra fluid.		Elevate your feet when sitting.
retains extra fluid.		Avoid tight clothing.
Constipation may sometimes occur.	Sometimes	If constipation is a problem:
		Exercise if you can.
		Drink plenty of fluids. Try ideas in Suggestions for Dealing with Constipation.*

OTHER SIDE EFFECTS	How common is it?	MANAGEMENT
High blood pressure may sometimes occur. New or worsening high blood pressure during treatment.	Sometimes	Your blood pressure will be checked each time you visit with your doctor. Contact your doctor if you develop high blood pressure, your blood pressure worsens, or you have severe headache, lightheadedness or dizziness between visits.

^{*}Please ask your oncologist or pharmacist for a copy.

THE FOLLOWING INFORMATION IS VERY IMPORTANT

STOP TAKING VEMURAFENIB AND COBIMETINIB AND SEE YOUR DOCTOR OR GET EMERGENCY HELP IMMEDIATELY IF YOU HAVE:

- Signs of bleeding problems such as headaches, dizziness or feeling weak, coughing up blood or blood clots, vomiting blood or vomit looking like "coffee grounds", blood in urine, red or black stools that look like tar, extensive bruising, pinpoint red spots on skin.
- Signs of an **infection** such as fever (over 38°C or 100.4°F) by an oral thermometer), shaking chills; severe sore throat, productive cough (coughing up thick or green sputum); cloudy or foul smelling urine; painful, tender, or swollen red skin wounds or sores.
- Signs of a **blood clot** such as chest pain, sudden shortness of breath or trouble breathing, pain in your legs with or without swelling, swelling in your arms and legs, a cool or pale arm or leg.
- Signs of **lung complications** (pneumonitis/ILD-inflammation of the lung) such as shortness of breath and cough.
- Signs of an allergic reaction soon after a treatment including rash, hives, dizziness, fast heart beat, swelling of the face, lips, tongue or throat, swallowing or breathing problems.
- Signs of heart problems such as fast or uneven heartbeat, shortness of breath, dizziness, or fainting.
- Severe abdominal pain.

SEE YOUR DOCTOR AS SOON AS POSSIBLE (DURING OFFICE HOURS) IF YOU HAVE:

- Signs of **anemia** such as unusual tiredness or weakness.
- Signs of **liver problems** such as yellow eyes or skin, white or clay-coloured stools.
- Signs of kidney problems such as lower back or side pain, swelling of feet or lower legs.
- Changes in eyesight, eye pain, or sensitivity of eyes to light.
- Signs of skin changes such as a new wart, a sore or reddish bump that bleeds or does not heal, or a change in size, shape, or colour of a mole, or thick or rough, scaly patches of the skin.
- Numbness or tingling in feet or hands.
- Inflamed or infected areas on the skin.

CHECK WITH YOUR DOCTOR IF ANY OF THE FOLLOWING CONTINUE OR BOTHER YOU:

- Uncontrolled nausea, vomiting, or diarrhea.
- Headache not controlled with acetaminophen (e.g., TYLENOL®).
- Skin rash, redness, or itching.
- Trouble sleeping or night sweats.
- Dizziness.
- Muscle spasms.
- Cough or dry mouth.
- For diabetics: uncontrolled blood sugars.

If you experience sympt,oms or changes in your body that have not been
described above but worry you, or in any symptoms are severe, contact:
at telephone number: