



Provincial Health Services Authority

For the Patient: LUAVAMLA

Other Names: First line treatment of advanced Epidermal Growth Factor Receptor (EGFR) mutation-positive Non-Small Cell Lung Cancer (NSCLC) with amivantamab and lazertinib

LU	LUn
AV	AdVanced
AM	AMivantamab
LA	LAzertinib

ABOUT THIS TREATMENT

What is this treatment used for?

- LUAVAMLA is a drug treatment for Non-Small Cell Lung Cancer (NSCLC).
- This treatment helps to slow down the growth of cancer cells in your body. It may help control some symptoms you are experiencing and delay or prevent new symptoms from developing.

How does this treatment work?

- Amivantamab (A-mih-VAN-tuh-mab) is a monoclonal antibody, a type of protein designed to target and interfere with the growth of cancer cells.
- Lazertinib (la-ZER-tih-nib) works by interfering with certain enzymes called tyrosine kinases that are important in transmitting the chemical signals needed for essential processes like cell division and replication in cancer cells.

TREATMENT SUMMARY

How are these medications given?

- Your treatment is made up of 'cycles'. Each cycle lasts 4 weeks (28 days). You will continue receiving cycles as long as the treatment remains effective and the side effects are manageable.
- Amivantamab is given by injection into the vein (referred to as intravenous or IV), and takes several hours to administer. In Cycle 1, amivantamab is given on Days 1, 2, 8, 15 and 22. In Cycle 2 and onwards, amivantamab is given on Days 1 and 15 only.
- Lazertinib is a tablet that you take by mouth
 - On your IV treatment days, **take** lazertinib **before** the amivantamab injection
 - You may take lazertinib with food or on an empty stomach
 - If you **miss a dose**, 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 more than one dose to make up for the missed dose.
 - If you **vomit** the dose of lazertinib, do not take a second dose. If vomiting continues, call your healthcare team during office hours for advice.
 - **Store** lazertinib tablets out of the reach of children, at room temperature, away from heat, light, and moisture.

The calendar below outlines your overall treatment plan:

Cycle 1:

	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
Week 1	Amivantamab Lazertinib	Amivantamab Lazertinib	Lazertinib	Lazertinib	Lazertinib	Lazertinib	Lazertinib
Week 2	Amivantamab Lazertinib	Lazertinib	Lazertinib	Lazertinib	Lazertinib	Lazertinib	Lazertinib
Week 3	Amivantamab Lazertinib	Lazertinib	Lazertinib	Lazertinib	Lazertinib	Lazertinib	Lazertinib
Week 4	Amivantamab Lazertinib	Lazertinib	Lazertinib	Lazertinib	Lazertinib	Lazertinib	Lazertinib

Cycles 2 and onward:

	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
Week 1	Amivantamab Lazertinib	Lazertinib	Lazertinib	Lazertinib	Lazertinib	Lazertinib	Lazertinib
Week 2	Lazertinib	Lazertinib	Lazertinib	Lazertinib	Lazertinib	Lazertinib	Lazertinib
Week 3	Amivantamab Lazertinib	Lazertinib	Lazertinib	Lazertinib	Lazertinib	Lazertinib	Lazertinib
Week 4	Lazertinib	Lazertinib	Lazertinib	Lazertinib	Lazertinib	Lazertinib	Lazertinib

ADDITIONAL MEDICATIONS

- You will be given a prescription for dexamethasone tablets to help reduce the risk of amivantamab reactions. Take dexamethasone as prescribed, **starting two days prior to your first treatment.**
- To reduce the risk of developing a blood clot, you will also be given a prescription for a blood thinner to take during the first 4 cycles of your treatment. Your treatment provider will decide if you need to continue taking the blood thinner beyond the first 4 cycles.
- To reduce the risk of developing skin and nail problems, you will also be given a prescription for:
 - An oral antibiotic to take twice daily for 12 weeks starting with the first treatment.
 - A topical antibiotic lotion to apply to your scalp daily after you finish the oral antibiotic.
 - A topical antiseptic soap to use on your hands and feet regularly.
- Use ceramide-based moisturizers regularly on your face and body to reduce the risk of skin and nail problems.
- You may be given a prescription for anti-nausea medications (to be filled at your regular pharmacy). Please bring your anti-nausea medications with you for each appointment. Your nurse will tell you when to take the anti-nausea medication.
- You may also need to take anti-nausea medications at home after therapy. It is easier to prevent nausea than treat it once it has occurred, so follow directions closely.

What will happen while I am being treated?

- You will have a blood test prior to Day 1 of each cycle. Your treatment provider will decide if you need a blood test prior to Days 8 and 15 during your first cycle. The dose and timing of your treatment may be changed based on your blood tests and/or other side effects.
- Your very first treatment will take longer than other treatments because a nurse will review the possible side effects of your treatment plan and will discuss with you how to manage them. It is a good idea to bring someone with you to your first treatment appointment.

INSTRUCTIONS FOR THE PATIENT

- Other medications may interact with amivantamab and lazertinib. Check with your healthcare team before you start taking any new medications including all prescription and nonprescription medicines, vitamins, and herbal supplements.
- The **drinking of alcohol** (in small amounts) does not appear to affect the safety or usefulness of your treatment.
- **Tell** doctors, dentists and other health professionals that you are being treated with amivantamab and lazertinib before you receive any treatment from them.
- Lazertinib may affect **fertility** in men and women. If you plan to have children, discuss this with your doctor before being treated with lazertinib.
- Amivantamab and lazertinib may damage sperm and may harm the baby if used during pregnancy. It is best to use **birth control** during your treatment. Ask your treatment provider how long you should continue using birth control after your treatment has ended. Tell your healthcare team right away if you or your partner becomes pregnant. Do not breastfeed during treatment.
- **Do not donate semen** during your treatment and for 3 months after your treatment has ended.

SIDE EFFECTS AND WHAT TO DO ABOUT THEM

- **Unexpected and unlikely side effects can occur with any drug treatment. The ones listed below are particularly relevant to your treatment plan.**
- Your healthcare team will review the risks of treatment and possible side effects with you before starting treatment.
- Side effects and tips to manage them are listed in the following table.

Management of Side Effects

SIDE EFFECTS	MANAGEMENT
Allergic reactions to amivantamab may occur. Signs of an allergic reaction may include flushing, rash, itching, dizziness, swelling or breathing problems. This can occur immediately or several hours after receiving amivantamab and usually only with the first or second dose.	Tell your nurse if this happens while you are receiving amivantamab or contact your oncologist immediately if this happens after you leave the clinic.

SIDE EFFECTS	MANAGEMENT
Pain or tenderness may occur where the needle was placed following amivantamab administration.	Apply cool compresses for 15-20 minutes several times a day.
Nausea and vomiting may occur. If you are vomiting and it is not controlled, you can quickly become dehydrated. Most people have little or no nausea.	You may be given a prescription for anti-nausea drug(s) to take before your treatment and/or 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 <i>Practical Tips to Help Manage Nausea*</i>. Tell your healthcare team if nausea or vomiting continues or is not controlled with your anti-nausea drug(s).
Skin reactions such as rash, redness, dryness, or itchiness commonly occur.	To help prevent skin reactions: • Apply moisturizer (e.g., CeraVe) to face and whole body liberally and often. • Avoid direct sunlight and tanning salons during treatment and for 2 months following treatment. • Wear a hat, long sleeves, and long pants outside on sunny days. • Wear a sunscreen that blocks both UVA and UVB and has a sun protection factor (SPF) of at least 30. Apply liberally, 30 minutes before exposure. Reapply every 2 hours and after swimming. • Refer to <i>Your Medication Sun Sensitivity and Sunscreens*</i> or the <i>BC Health Guide</i> for more information. If skin reaction persists or gets worse, call your healthcare team. Otherwise, be sure to mention it at your next visit.
Nail changes may commonly occur. The skin around the nails may become painful, red, or swollen. Nails may rarely loosen or fall off.	To help prevent nail problems: • Do not cut your nails too short. • Avoid biting your nails. • Limit use of nail polish and nail polish remover. If nails are painful, you may take acetaminophen (e.g., TYLENOL) every 4-6 hours, to a maximum of 4 g (4000 mg) per day. Tell your healthcare team at your next visit.
Diarrhea may sometimes occur. If you have diarrhea and it is not controlled, you can quickly become dehydrated.	If diarrhea is a problem: • Drink plenty of fluids. • Eat and drink often in small amounts. • Avoid high fibre foods as outlined in <i>Food Choices to Help Manage Diarrhea caused by Cancer Treatment*</i>. Tell your healthcare team if you have diarrhea for more than 24 hours.

SIDE EFFECTS	MANAGEMENT
Constipation may sometimes occur.	- Exercise if you can. - Drink plenty of fluids. - Try the ideas in <i>Food Choices to Help Manage Constipation*</i>.
Your white blood cells may decrease during your treatment. They usually return to normal after your last treatment. White blood cells protect your body by fighting bacteria (germs) that cause infection. When they are low, you are at greater risk of having an infection.	To help prevent infection: - Wash your hands often and always after using the bathroom. - Avoid crowds and people who are sick. Stop taking lazertinib and call your healthcare team immediately at the first sign of an infection such as fever (over 38°C or 100°F by an oral thermometer), chills, cough, or burning when you pass urine.
Your platelets may decrease during your treatment. They usually return to normal after your last treatment. Platelets help to make your blood clot when you hurt yourself. You may bruise or bleed more easily than usual.	To help prevent bleeding problems: - Try not to bruise, cut, or burn yourself. - Clean your nose by blowing gently. Do not pick your nose. - Avoid constipation. - Brush your teeth gently with a soft toothbrush as your gums may bleed more easily. Maintain good oral hygiene. Some medications such as ASA (e.g., ASPIRIN) or ibuprofen (e.g., ADVIL) may increase your risk of bleeding. - Do not stop taking any medication that has been prescribed by your doctor (e.g., ASA for your heart). - For minor pain, try acetaminophen (e.g., TYLENOL) first, to a maximum of 4 g (4000 mg) per day, but occasional use of ibuprofen may be acceptable.
Minor bleeding, such as nosebleeds , may sometimes occur.	- Sit up straight and tip your head slightly forward. Tilting your head back may cause blood to run down your throat. - Pinch your nostrils shut between your thumb and forefinger or apply firm pressure against the bleeding nostril for 10 full minutes. - After 10 minutes, check to see if your nose is still bleeding. If it is, hold it for 10 more minutes. - Stay quiet for a few hours and do not blow your nose for at least 12 hours after the bleeding has stopped. Get emergency help if a nosebleed lasts longer than 20 minutes.

SIDE EFFECTS	MANAGEMENT
Sore mouth may sometimes occur. Mouth sores can occur on the tongue, the sides of the mouth, or in the throat. Mouth sores or bleeding gums can lead to an infection.	- Brush your teeth gently after eating and at bedtime with a very soft toothbrush. If your gums bleed, use gauze instead of a brush. Use baking soda instead of toothpaste. - Make a mouthwash with ¼ teaspoon baking soda AND ¼ teaspoon salt in 1 cup warm water and rinse several times a day. - Try the ideas in <i>Food Ideas to Try with a Sore Mouth</i>*.
Headache may sometimes occur.	Take acetaminophen (e.g., TYLENOL) every 4-6 hours if needed, to a maximum of 4 g (4000 mg) per day.
Muscle, back, or joint pain may sometimes occur.	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 healthcare team if the pain interferes with your activity.
Sugar control is commonly affected in patients with diabetes.	Check your blood sugar regularly if you have diabetes.
Swelling of hands, feet, or lower legs may sometimes occur if your body retains extra fluid.	If swelling is a problem: - Elevate your feet when sitting. - Avoid tight clothing.
Tiredness and lack of energy may sometimes occur.	- Do not drive a car or operate machinery if you are feeling tired. - Try the ideas in <i>Managing Fatigue (Tiredness)</i>*.
Loss of appetite may sometimes occur.	Try the ideas in <i>Food Ideas to Help with Decreased Appetite</i> *.
Hair loss is rare with this treatment.	If hair loss is a problem, refer to <i>Resources for Hair Loss and Appearance Changes – Patient Handout</i> *.
Blood clots may sometimes occur. This is more likely to happen if you have had blood clots before. Signs to watch for include tenderness or hardness over a vein, calf tenderness, sudden onset of cough, chest pain, or shortness of breath.	To help prevent blood clots: - Keep active. - Drink plenty of fluids. - Avoid tight clothing. - Do not sit with your legs crossed at the knees.
Numbness or tingling of the fingers or toes may sometimes occur. This will slowly return to normal once your treatments are over. This may take several months.	- Be careful when handling items that are sharp, hot, or cold. - Be careful when walking on uneven surfaces or doing activities that need you to balance or be steady. - Tell your healthcare team at your next visit if you have trouble with buttons, writing, picking up small objects, walking, or have fallen.

***Please ask your nurse or pharmacist for a copy.**

STOP TAKING LAZERTINIB AND CHECK WITH YOUR HEALTHCARE TEAM OR GET EMERGENCY HELP IMMEDIATELY IF YOU HAVE:

- Signs of an **allergic reaction** (rare) soon after a treatment including dizziness, fast heartbeat, face swelling, or breathing problems.
- Signs of an **infection** such as fever (over 38°C or 100°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 tenderness or hardness over a vein, calf swelling and tenderness, sudden onset of cough, chest pain, or shortness of breath.
- Signs of **heart or lung problems** such as fast or uneven heartbeat, chest pain, chest pressure, shortness of breath or difficulty breathing, swelling of feet or lower legs, or fainting.

CHECK WITH YOUR HEALTHCARE TEAM AS SOON AS POSSIBLE (DURING OFFICE HOURS) IF YOU HAVE:

- Signs of **anemia** such as unusual tiredness or weakness.
- **Changes in eyesight**, blurry vision, eye pain, or sensitivity to light.
- **Skin rash** that blisters, peels, or is painful.
- **Cough** that doesn't go away or gets worse.

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

- Abdominal pain.
- Dry or watery eyes.
- Changes to eyelashes, red or swollen eyelids.
- Dry skin, redness, or itchiness.
- Easy bruising or minor bleeding.
- Dizziness

If you experience symptoms or changes in your body that have not been described above but worry you, tell your healthcare team about them at the time of your next visit. If any symptoms are severe, contact:

_____ at telephone number _____

If you have symptoms that are severe or need emergency services, go to your local hospital's Emergency Department.