For the Patient: **Selpercatinib**
Other names: RETEVMO®

- **Selpercatinib** (sel" per ka' ti nib) is a drug that is used to treat some types of cancer. It is a capsule that you take by mouth.
- Tell your doctor if you have ever had an unusual or **allergic reaction** to selpercatinib before taking selpercatinib.
- **Blood tests** may be taken regularly during treatment. The dose and timing of your treatment may be changed based on the test results and/or other side effects.
- It is important to **take** selpercatinib exactly as directed by your doctor. Make sure you understand the directions.
- You may **take** selpercatinib with food or on an empty stomach.
- If you **miss a dose** of selpercatinib, take it as soon as you can if it is within 6 hours of the missed dose. If it is more than 6 hours since your missed dose, skip the missed dose and go back to your usual dosing times.
- If you **vomit** the dose of selpercatinib, do not take a second dose. Call your healthcare team during office hours for advice as a medication to prevent nausea may be required for future doses.
- Other drugs such as rosuvastatin (CRESTOR®), repaglinide (GLUCONORM®) or dabigatran (PRADAXA®) may **interact** with selpercatinib. Tell your doctor if you are taking these 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 for further instructions if you are taking drugs to reduce stomach acid such as omeprazole (LOSEC®), famotidine (PEPCID®), or calcium carbonate (TUMS®). Check with your doctor or pharmacist before you start or stop taking any other drugs.
- **Avoid grapefruit and grapefruit juice** for the duration of your treatment, as these may interact with selpercatinib.
- The **drinking of alcohol** (in small amounts) does not appear to affect the safety or usefulness of selpercatinib.
- Selpercatinib may affect **fertility** in men and women. If you plan to have children, discuss this with your doctor before being treated with selpercatinib.

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- Selpercatinib may damage sperm and harm the baby if used during pregnancy. It is best to use **birth control** while being treated with selpercatinib and for at least two weeks after your last dose. Tell your doctor right away if you or your partner becomes pregnant. Do not breastfeed during treatment and for two weeks after your last dose.

- **Store** selpercatinib capsules out of the reach of children, at room temperature, away from heat, light, and moisture.

- **Tell** your doctor, dentist, and other health professionals that you are being treated with selpercatinib before you receive any treatment from them.

- **Tell** your doctor if you are planning to have **surgery.** Your doctor may ask you to stop taking selpercatinib 1 week before your surgery and not restart it until 2 weeks after your surgery or once your surgical wound has healed. This helps to lower the risk of bleeding and may prevent problems with wound healing after surgery. Always check with your doctor before stopping or restarting selpercatinib.

Side effects are listed in the following table in the order in which they may occur. Tips to help manage the side effects are included.

SIDE EFFECTS	MANAGEMENT
Allergic reactions may rarely occur. Signs of an allergic reaction may include fever, rash, muscle pain or joint pain. Reactions may be delayed (e.g., 2-4 weeks).	Stop taking selpercatinib and contact your healthcare team. Do not manage allergic reactions on your own. Your doctor may give you a prescription to manage allergic reactions. Your dose of selpercatinib may need to be changed.
Nausea and **vomiting** may occur. If you are vomiting and it is not controlled, you can quickly become dehydrated.	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 *Practical Tips to Manage Nausea.** Tell your healthcare team if nausea or vomiting continues or is not controlled with your antinausea drug(s).

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SIDE EFFECTS	MANAGEMENT
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 selpercatinib 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. 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®) to a maximum of 4 g (4000 mg) per day.
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 *Food Choices to Help Manage Diarrhea*.* Tell your healthcare team if you have diarrhea for more than 24 hours.
Constipation may sometimes occur.	• Exercise if you can. • Drink plenty of fluids. Try the ideas in *Food Choices to Manage Constipation*.*

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SIDE EFFECTS	MANAGEMENT
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.
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.
Loss of appetite and **weight loss** may sometimes occur.	Try the ideas in *Food Ideas to Help with Decreased Appetite.**
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.
Sugar control may sometimes be affected in patients with diabetes.	Check your blood sugar regularly if you have diabetes.
Abnormal heart rhythm (QT prolongation) may sometimes occur.	Minimize your risk of abnormal heart rhythm by: • always checking with your pharmacist or doctor about drug interactions when starting a new medication, herbal product, or supplement. • avoiding grapefruit and grapefruit juice. Get emergency help ***immediately*** if your heart is beating irregularly or fast OR if you feel faint, lightheaded, or dizzy.

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SIDE EFFECTS	MANAGEMENT
High blood pressure may sometimes occur. This can happen very quickly after starting treatment.	Your blood pressure may be checked by your healthcare team during your visit. • You may be asked to check your blood pressure frequently between visits. • Your doctor may give you a prescription for blood pressure medication if your blood pressure is high. Tell your doctor if you are already on blood pressure medication as they may need to adjust your dose.
Tiredness and lack of energy may commonly occur.	• Do not drive a car or operate machinery if you are feeling tired. • Try the ideas in *Fatigue/Tiredness – Patient Handout*.*
Increase in **cholesterol or triglycerides** (one of the types of fat in the blood) may sometimes occur.	Tell your doctor if you have: • A history of heart disease. • High blood pressure. • High cholesterol or triglycerides. • You may need to have your cholesterol level checked a few months after starting selpercatinib.

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

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

- 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 **bleeding problems** such as black or tarry stools, blood in urine, pinpoint red spots on skin, or extensive bruising.
- Signs of **heart** or **lung problems** such as fast or uneven heartbeat, chest pain or chest pressure, shortness of breath or difficulty in breathing.
- Signs of **tumour lysis syndrome** such as more than one of these symptoms: abdominal pain/nausea/vomiting, dark or cloudy urine, moodiness, restlessness, confusion, shortness of breath, irregular heartbeat, unusual tiredness, fever/chills, seizure or muscle/joint pain.

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

- **Cough** that doesn't go away or gets worse.
- 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.
- Signs of **thyroid problems** such as unusual weight gain, feeling cold, or unusual tiredness or weakness.

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

- Easy bruising or minor bleeding.
- Wounds or sores that are slow to heal.
- For patients with diabetes: uncontrolled blood sugars.

REPORT ADDITIONAL PROBLEMS TO YOUR HEALTHCARE TEAM

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