

## Regimen Monograph

[Regimen Name](#) | [Drug Regimen](#) | [Cycle Frequency](#) | [Premedication and Supportive Measures](#) | [Administrative Information](#) | [References](#) | [Other Notes](#) | [Disclaimer](#)

## A - Regimen Name

# BINIENCO Regimen

Binimetinib-Encorafenib

**Disease Site** Lung  
Non-Small Cell

**Intent** Palliative

**Regimen Category** **Evidence-informed :**

Regimen is considered appropriate as part of the standard care of patients; meaningfully improves outcomes (survival, quality of life), tolerability or costs compared to alternatives (recommended by the Disease Site Team and national consensus body e.g. pan-Canadian Oncology Drug Review, pCODR). Recommendation is based on an appropriately conducted phase III clinical trial relevant to the Canadian context OR (where phase III trials are not feasible) an appropriately sized phase II trial. Regimens where one or more drugs are not approved by Health Canada for any indication will be identified under Rationale and Use.

This **Regimen Abstract** is an **abbreviated** version of a Regimen Monograph and contains only top level information on usage, dosing, schedule, cycle length and special notes (if available). Information in regimen abstracts is accurate to the extent of the ST-QBP regimen master listings, and has not undergone the full review process of a regimen monograph. Full regimen monographs will be published for each ST-QBP regimen as they are developed.

**Rationale and Uses** Treatment of patients with BRAF V600-mutant metastatic non-small cell lung cancer

[back to top](#)

**B - Drug Regimen**

[binimetinib](#) 45 mg PO BID

(This drug is not currently publicly funded for this regimen and intent)

[encorafenib](#) 450\* mg PO Daily

(This drug is not currently publicly funded for this regimen and intent)

\*If binimetinib is held, reduce encorafenib (up to a dose of 300 mg once daily) until binimetinib is resumed.

[back to top](#)

**C - Cycle Frequency****CONTINUOUS TREATMENT**

Until disease progression or unacceptable toxicity

[back to top](#)

**D - Premedication and Supportive Measures**

**Antiemetic Regimen:** Low – No routine prophylaxis; PRN recommended

- Also refer to [CCO Antiemetic Recommendations](#).

**Screen for hepatitis B virus in all cancer patients starting systemic treatment.** Refer to the [hepatitis B virus screening and management](#) guideline.

[back to top](#)

**J - Administrative Information**

Outpatient prescription for home administration

[back to top](#)

## K - References

Aboubakar Nana F, Ocak S. Targeting *BRAF* Activation as Acquired Resistance Mechanism to EGFR Tyrosine Kinase Inhibitors in *EGFR*-Mutant Non-Small-Cell Lung Cancer. *Pharmaceutics*. 2021 Sep 15;13(9):1478.

Meng P, Koopman B, Kok K, et al. Combined osimertinib, dabrafenib and trametinib treatment for advanced non-small-cell lung cancer patients with an osimertinib-induced BRAF V600E mutation. *Lung Cancer*. 2020 Aug;146:358-61.

Prescribing information: Binimetinib (Mektovi). Pfizer Inc. (USA). September 2024.

Prescribing information: Encorafenib (Braftovi). Pfizer Inc. (USA). December 2024.

Riely GJ, Smit EF, Ahn M-J, et al., Efficacy and safety of encorafenib (enco) plus binimetinib (bini) in patients with BRAF V600E-mutant (BRAFFV600E) metastatic non-small cell lung cancer (NSCLC) from the phase 2 PHAROS study. *J Clin Oncol* 2023;41(16 suppl):9018.

**February 2025** new ST-QBP regimen

[back to top](#)

## M - Disclaimer

### **Regimen Abstracts**

*A Regimen Abstract is an abbreviated version of a Regimen Monograph and contains only top level information on usage, dosing, schedule, cycle length and special notes (if available). It is intended for healthcare providers and is to be used for informational purposes only. It is not intended to constitute or be a substitute for medical advice, and all uses of the Regimen Abstract are subject to clinical judgment. Such information is provided on an "as-is" basis, without any representation, warranty, or condition, whether express, or implied, statutory or otherwise, as to the information's quality, accuracy, currency, completeness, or reliability, and Cancer Care Ontario disclaims all liability for the use of this information, and for any claims, actions, demands or suits that arise from such use.*

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### **Regimen Monographs**

Refer to the [New Drug Funding Program](#) or [Ontario Public Drug Programs](#) websites for the most up-to-date public funding information.

*The information set out in the drug monographs, regimen monographs, appendices and symptom management information (for health professionals) contained in the Drug Formulary (the "Formulary") is intended for healthcare providers and is to be used for informational purposes only. The information is not intended to cover all possible uses,*

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[back to top](#)