

amivantamab

Pronunciation: a-mih-VAN-tuh-mab

Other Name(s): Rybrevant®

Appearance: pale yellow liquid mixed into larger bags of fluids

This handout gives general information about this cancer medication.

You will learn:

- who to contact for help
- what the medication is
- how it is given
- what to expect while on medication



This handout was created by Ontario Health (Cancer Care Ontario) together with patients and their caregivers who have also gone through cancer treatment. It is meant to help support you through your cancer treatment and answer some of your questions.

This information does not replace the advice of your health care team. Always talk to your health care team about your treatment.

Who do I contact if I have questions or need help?

My cancer health care provider is: _____

During the day I should contact: _____

Evenings, weekends and holidays: _____

What is this treatment for?

- Amivantamab is used to treat a certain type of lung cancer called non-small cell lung cancer (NSCLC).

What should I do before I start this treatment?

Tell your health care team if you have or had significant medical condition(s), especially if you have / had:

- lung or breathing problems
- skin conditions (such as psoriasis or rosacea)
- eye problems, or if you use contact lenses
- blood clots (especially in your legs or lungs)
- any allergies.



Remember To:

- ✓ Tell your health care team about all of the other medications you are taking.
- ✓ Keep taking other medications that have been prescribed for you, unless you have been told not to by your health care team.

You will have a blood test to check for hepatitis B before starting treatment. See the [Hepatitis B and Cancer Medications](#) pamphlet for more information.

How is this treatment given?

- This medication is given through an IV (injected into a vein). Talk to your health care team about your treatment schedule.
- Amivantamab may be given over a longer period of time during the first cycle. If you don't have problems with these infusions, it will be given over a shorter time for the following cycles.
- You will be given this treatment along with other medications to help prevent allergic reactions or skin rash.
- If you missed your treatment appointment, talk to your health care team to find out what to do.

Other medications you may be given with this treatment

To Prevent Allergic Reaction

You will be given medications before your treatment to help prevent allergic reactions before they start.

- There are different types of medications to stop allergic reactions. They are called:
 - ◊ antihistamines (such as diphenhydramine or Benadryl®)
 - ◊ analgesics/antipyretics (such as acetaminophen or Tylenol®)
 - ◊ corticosteroids (such as dexamethasone)

To Prevent Skin Rash

You may be given medications to use during your amivantamab treatment to prevent skin rashes, or stop them from getting worse.

- These medications may include:
 - ◊ a corticosteroid applied to your skin, such as hydrocortisone cream.
 - ◊ an antibiotic, such as clindamycin (applied to your skin) or doxycycline (taken by mouth)

DO this while on treatment

- ✓ DO check with your health care team before getting any vaccinations, surgery, dental work or other medical procedures.
- ✓ DO consider asking someone to drive you to and from the hospital on your treatment days. You may feel drowsy or dizzy after your treatment.
- ✓ DO protect your skin from the sun. Wear a long sleeved shirt, long pants and a hat. Apply sunscreen with UVA and UVB protection and an SPF of at least 30. Your skin may be more sensitive to the sun and you could develop a bad sunburn or rash more easily. You will need to do this while on treatment and for 2 months after your treatment ends.
- ✓ DO use moisturizers regularly on your skin and nails while on treatment and for 2 months after treatment ends. Make sure you use an emollient (such as cream or ointment) that is alcohol and fragrance-free.

DO NOT do this while on treatment

- ✗ DO NOT take any other medications, such as vitamins, over-the-counter (non-prescription) drugs or substances, or natural health products without checking with your health care team.
- ✗ DO NOT start any complementary or alternative therapies, such as acupuncture or homeopathic products, without checking with your health care team.
- ✗ DO NOT use tobacco products (such as smoking cigarettes or vaping) or drink alcohol while on treatment without talking to your health care team first. Smoking and drinking can make side effects worse and make your treatment not work as well.
- ✗ DO NOT drive or operate machinery if your vision is blurry or impaired in any way.

Will this treatment interact with other medications or natural health products?

Although this medication is unlikely to interact with other medications, vitamins, foods, traditional medicines and natural health products, tell your health care team about all of your:

- prescription and over-the-counter (non-prescription) medications
- other drugs and substances, such as cannabis/marijuana (medical or recreational)
- natural health products such as vitamins, herbal teas, homeopathic medicines, and other supplements, or traditional medicines

Check with your health care team before starting or stopping any of them.



Talk to your health care team **BEFORE** taking or using these :

- Anti-inflammatory medications such as ibuprofen (Advil® or Motrin®), naproxen (Aleve®) or Aspirin®.
- Over-the-counter products such as dimenhydrinate (Gravol®)
- Natural health products such as St. John's Wort
- Traditional medicines
- Supplements such as vitamin C
- Grapefruit juice
- Alcoholic drinks
- Tobacco
- All other drugs or substances, such as marijuana or cannabis (medical or recreational)

What to do if you feel unwell, have pain, a headache or a fever

- ✓ **Always** check your temperature to see if you have a fever **before** taking any medications for fever or pain (such as acetaminophen (Tylenol®) or ibuprofen (Advil®)).
 - Fever can be a sign of infection that may need treatment right away.
 - If you take these medications before you check for fever, they may lower your temperature and you may not know you have an infection.

How to check for fever:

Keep a digital (electronic) thermometer at home and take your temperature if you feel hot or unwell (for example, chills, headache, mild pain).

- You have a fever if your temperature taken **in your mouth (oral temperature)** is:
 - 38.3°C (100.9°F) or higher at any time
- OR
- 38.0°C (100.4°F) or higher for at least one hour.



If you do have a fever:

- ✓ **Try to contact your health care team. If you are not able to talk to them for advice, you MUST get emergency medical help right away.**
- ✓ Ask your health care team for the [Fever](#) pamphlet for more information.

If you do not have a fever but have mild symptoms such as headache or mild pain:

- ✓ Ask your health care team about the right medication for you. **Acetaminophen (Tylenol®)** is a safe choice for most people.



Talk to your health care team before you start taking ibuprofen (Advil®, Motrin®), naproxen (Aleve®) or ASA (Aspirin®), as they may increase your chance of bleeding or interact with your cancer treatment.



Talk to your health care team if you already take **low dose aspirin** for a medical condition (such as a heart problem). It may still be safe to take.

How will this treatment affect sex, pregnancy and breastfeeding?

Talk to your health care team about:

- How this treatment may affect your sexual health
- How this treatment may affect your ability to have a baby, if this applies to you

This treatment may harm an unborn baby. Tell your health care team if you or your partner are pregnant, become pregnant during treatment, or are breastfeeding.

- If there is **any** chance of pregnancy happening, you and your partner together must use **2 effective forms of birth control** at the same time until at least **3 months** after your last treatment dose. Talk to your health care team about which birth control options are best for you.
- Do not donate sperm while on treatment and for **3 months** after your last dose.
- Do not breastfeed while on this treatment and for **3 months** after your last dose.

What are the side effects of this treatment?

The following table lists side effects that you may have when getting amivantamab treatment. The table is set up to list the most common side effects first and the least common last. It is unlikely that you will have all of the side effects listed and you may have some that are not listed.

Read over the side effect table so that you know what to look for and when to get help. Refer to this table if you experience any side effects while on amivantamab treatment.

Very Common Side Effects (50 or more out of 100 people)	
Side effects and what to do	When to contact health care team
Rash; dry, itchy skin (May be severe) What to look for? - You may have cracked, rough, flaking or peeling areas of the skin. - Your skin may look red and feel warm, like a sunburn. - Your skin may itch, burn, sting or feel very tender when touched. What to do? To prevent and treat dry skin: - Use fragrance-free skin moisturizer. - Protect your skin from the sun and the cold. - Use sunscreen with UVA and UVB protection and a SPF of at least 30. - Avoid perfumed products and lotions that contain alcohol. - Drink 6 to 8 cups of non-alcoholic, non-caffeinated liquids each day, unless your health care team has told you to drink more or less. Continue this skin care routine for 2 months after your treatment ends. Rash may be severe in some rare cases and cause your skin to blister or peel. If this happens, get emergency medical help right away.	Talk to your health care team if it does not improve or if it is severe.

Very Common Side Effects (50 or more out of 100 people)	
Side effects and what to do	When to contact health care team
Allergic reaction What to look for? • Fever, itchiness, rash, swollen lips, face or tongue, chest and throat tightness. • It may happen during or shortly after your treatment is given to you and may be severe. What to do? • Tell your nurse right away if you feel any signs of allergic reaction during or just after your treatment. • Talk to your health care team for advice if you have a mild skin reaction.	Get emergency medical help right away for severe symptoms.
Nail changes What to look for? • You may have: ◦ changes in nail colour ◦ pain, tenderness or swelling around the nail ◦ loosening of nails • Nails will slowly return to normal after treatment ends. What to do? • Moisturize your nails and cuticles. Continue doing this for 2 months after your treatment ends. • Do not use nail polish and fake fingernails until your nails have gone back to normal. • Wear gloves when doing house chores or gardening.	Talk to your health care team if it does not improve or if it is severe.

Common Side Effects (25 to 49 out of 100 people)	
Side effects and what to do	When to contact health care team
Headache, mild joint, muscle pain or cramps What to look for? • New pain in your muscles or joints, muscle cramps, or feeling achy. • Mild headache What to do? • Take pain medication (such as acetaminophen) as needed, or opioids such as codeine, morphine, hydromorphone, oxycodone) as prescribed. • Read the above section: "What to do if you feel unwell, have pain, a headache or a fever" before taking acetaminophen (Tylenol®), ibuprofen (Advil®, Motrin®), naproxen (Aleve®) or Aspirin. These medications may hide an infection that needs treatment or they may increase your risk of bleeding. • Rest often and try light exercise (such as walking) as it may help. Ask your health care team for the Pain pamphlet for more information. If you have a sudden, severe headache get emergency medical help right away.	Talk to your health care team if it does not improve or if it is severe.
Low levels of albumin in your blood Albumin is a protein that is found in the blood. It helps to maintain pressure in the blood vessels and move substances, such as hormones and medications through your body. Your health care team may check your levels of albumin with a blood test. Low albumin may not cause any symptoms unless your level is very low. What to look for? • Fatigue (feeling tired) • Muscle weakness or cramps • Loss of appetite • Swelling in your ankles or legs • Swelling in your belly (if you also have liver problems) What to do? If you have any of these symptoms, talk to your health care team. If you have swelling in your belly, get emergency medical help right away.	If you have any of these symptoms, talk to your health care team. If you have swelling in your belly, get emergency medical help right away.

Common Side Effects (25 to 49 out of 100 people)	
Side effects and what to do	When to contact health care team
Fatigue What to look for? - Feeling of tiredness or low energy that lasts a long time and does not go away with rest or sleep. What to do? - Be active. Aim to get 30 minutes of moderate exercise (you are able to talk comfortably while exercising) on most days. - Check with your health care team before starting any new exercise. - Pace yourself, do not rush. Put off less important activities. Rest when you need to. - Ask family or friends to help you with things like housework, shopping, and child or pet care. - Eat well and drink at least 6 to 8 glasses of water or other liquids every day (unless your health care team has told you to drink more or less). - Avoid driving or using machinery if you are feeling tired. Ask your health care team for the Fatigue pamphlet for more information.	Talk to your health care team if it does not improve or if it is severe.
Mild swelling What to look for? - You may have mild swelling or puffiness in your arms and/or legs. Rarely, this may be severe. What to do? To help prevent swelling: - Eat a low-salt diet. If you have swelling: - Wear loose-fitting clothing. - For swollen legs or feet, keep your feet up when sitting.	Talk to your health care team if it does not improve or if it is severe.
	Talk to your health

Common Side Effects (25 to 49 out of 100 people)	
Side effects and what to do	When to contact health care team
Mouth sores What to look for? • Round, painful, white or gray sores inside your mouth that can occur on the tongue, lips, gums, or inside your cheeks. • In more severe cases they may make it hard to swallow, eat or brush your teeth. • They may last for 3 days or longer. What to do? To help prevent mouth sores: • Take care of your mouth by gently brushing and flossing regularly. • Rinse your mouth often with a homemade mouthwash. • To make a homemade mouthwash, mix 1 teaspoonful of baking soda and 1 teaspoonful of salt in 4 cups (1L) of water. • Do not use store-bought mouthwashes, especially those with alcohol, because they may irritate your mouth. If you have mouth sores: • Avoid hot, spicy, acidic, hard or crunchy foods. • Your doctor may prescribe a special mouthwash to relieve mouth sores and prevent infection. • Talk to your health care team as soon as you notice mouth or lip sores or if it hurts to eat, drink or swallow. Ask your health care team for the Oral Care (Mouth Care) pamphlet for more information.	care team as soon as you notice mouth or lip sores or if it hurts to eat, drink or swallow.

Less Common Side Effects (10 to 24 out of 100 people)	
Side effects and what to do	When to contact health care team
Nausea and vomiting What to look for? • Nausea is feeling like you need to throw up. You may also feel light-headed. • You may feel nausea within hours to days after your treatment. What to do? To help prevent nausea: • It is easier to prevent nausea than to treat it once it happens. • If you were given anti-nausea medication(s), take them as prescribed, even if you do not feel like throwing up. • Drink clear liquids and have small meals. Get fresh air and rest. • Do not eat spicy, fried foods or foods with a strong smell. • Limit caffeine (like coffee, tea) and avoid alcohol. If you have nausea or vomiting: • Take your rescue (as-needed) anti-nausea medication(s) as prescribed. • Ask your health care team for the Nausea & Vomiting pamphlet for more information. • Talk to your health care team if: ◦ nausea lasts more than 48 hours ◦ vomiting lasts more than 24 hours or if it is severe	Contact your healthcare team if nausea lasts more than 48 hours or vomiting lasts more than 24 hours.
Constipation What to look for? • Having bowel movements (going poo) less often than normal. • Small hard stools (poo) that look like pellets. • The need to push hard and strain to have any stool (poo) come out. • Stomach ache or cramps. • A bloated belly, feeling of fullness, or discomfort. • Leaking of watery stools (poo). • Lots of gas or burping. • Nausea or vomiting. What to do?	Talk to your health care team if it does not improve or if it is severe.

Less Common Side Effects (10 to 24 out of 100 people)	
Side effects and what to do	When to contact health care team
To help prevent constipation: • Try to eat more fiber rich foods like fruits with skin, leafy greens and whole grains. • Drink at least 6 to 8 cups of liquids each day unless your health care team has told you to drink more or less. • Be Active. Exercise can help to keep you regular. • If you take opioid pain medication, ask your health care team if eating more fibre is right for you. To help treat constipation: • If you have not had a bowel movement in 2 to 3 days you may need to take a laxative (medication to help you poo) to help you have regular bowel movements. Ask your health care team what to do. Ask your health care team for the Constipation Pamphlet for more information.	
Too much or too little salt in your body What to look for? • Muscle spasms, cramping, weakness, twitching, or convulsions. • Irregular heartbeat, confusion or blood pressure changes. What to do? Get emergency medical help right away for severe symptoms.	Get emergency medical help right away for severe symptoms.
Cough and feeling short of breath What to look for? • You may have a cough and feel short of breath. • Symptoms that commonly occur with a cough are: ◦ wheezing or a whistling breathing ◦ runny nose ◦ sore throat ◦ heartburn ◦ weight loss ◦ fever and chills • Rarely this may be severe with chest pain, trouble breathing or coughing up blood.	Talk to your health care team. If you are not able to talk to your health care team for advice, and you have a fever or severe symptoms, you MUST get emergency medical help right away.

Less Common Side Effects (10 to 24 out of 100 people)	
Side effects and what to do	When to contact health care team
What to do? • Check your temperature to see if you have a fever. Read the above section "What to do if you feel unwell, have pain, a headache or a fever". • If you have a fever, try to talk to your health care team. If you are not able to talk to them for advice, you MUST get emergency medical help right away. • If you have a severe cough with chest pain, trouble breathing or you are coughing up blood, get medical help right away.	
Liver problems Your health care team may check your liver function with a blood test. Liver changes do not usually cause any symptoms. What to look for? • Rarely, you may develop yellowish skin or eyes, unusually dark pee or pain on the right side of your belly. This may be severe. What to do? If you have any symptoms of liver problems, get emergency medical help right away.	Get emergency medical help right away.
Low appetite What to look for? • Loss of interest in food or not feeling hungry. • Weight loss. What to do? • Try to eat your favourite foods. • Eat small meals throughout the day. • You may need to take meal supplements to help keep your weight up. • Talk to your health care team if you have no appetite. Ask your health care team for the Loss of Appetite pamphlet for more information.	Talk to your health care team if it does not improve or if it is severe.

Less Common Side Effects (10 to 24 out of 100 people)	
Side effects and what to do	When to contact health care team
Diarrhea What to look for? - Loose, watery, unformed stool (poo) that may happen days to weeks after you get your treatment. What to do? If you have diarrhea: - Take anti-diarrhea medication if your health care team prescribed it or told you to take it. - Do not eat foods or drinks with artificial sweetener (like chewing gum or 'diet' drinks), coffee and alcohol, until your diarrhea has stopped. - Eat many small meals and snacks instead of 2 or 3 large meals. - Drink at least 6 to 8 cups of liquids each day, unless your health care team has told you to drink more or less. - Talk to your health care team if you can't drink 6 to 8 cups of liquids each day when you have diarrhea. You may need to drink special liquids with salt and sugar, called Oral Rehydration Therapy. - Talk to your health care team if your diarrhea does not improve after 24 hours of taking diarrhea medication or if you have diarrhea more than 7 times in one day. Ask your health care team for the Diarrhea pamphlet for more information.	Talk to your health care team if no improvement after 24 hours of taking diarrhea medication or if severe (more than 7 times in one day).
Eye problems What to look for? - Your eyes may feel dry, irritated, or painful. - They may look red and have a lot of tears. - They may feel sensitive to light. - Your vision may be blurry or you may have changes to your vision. What to do? - Stop wearing contact lenses. - Wear sunglasses with UV protection. - Use protective eyewear (goggles or helmet with face mask) when playing	Contact your health care team as soon as possible (office hours).

If you have **any** of the following, talk to your cancer health care team or get emergency medical help right away:

- For more information on how to manage your symptoms ask your health care provider, or visit: <https://www.cancercareontario.ca/symptoms>.

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The information set out in the medication information sheets, regimen information sheets, and symptom management information (for patients) contained in the Drug Formulary (the "Formulary") is intended to be used by health professionals and patients for informational purposes only. The information is not intended to cover all possible uses, directions, precautions, drug interactions or side effects of a certain drug, nor should it be used to indicate that use of a particular drug is safe, appropriate or effective for a given condition.

A patient should always consult a healthcare provider if he/she has any questions regarding the information set out in the Formulary. The information in the Formulary is not intended to act as or replace medical advice and should not be relied upon in any such regard. All uses of the Formulary are subject to clinical judgment and actual prescribing patterns may not follow the information provided in the Formulary.