Medication Information Sheet

niraparib (nye-RAP-a-rib)

This document provides general information about your medication. It does not replace the advice of your health care professional. Always discuss your therapy with your health care professional and refer to the package insert for more details.

Other Name: Zejula

Appearance: tablet or capsule

What is this medication for?

• For treating certain types of cancers such as ovarian, fallopian tube, or peritoneal cancer.

What should I do before I have this medication?

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

- high blood pressure or heart problems
- liver or kidney problems or
- any allergies

This drug contains a small amount of lactose. If you cannot have lactose, talk to your health care team.

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.

How will this medication affect sex, pregnancy and breastfeeding?

Talk to your health care team about:

- How this medication may affect your sexual health.
- Symptoms of menopause such as hot flashes if this applies to you.
- How this medication may affect your ability to have a baby, if this applies to you.

This medication can 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 **6 months** after your last dose. Talk to your health care team about which birth control options are best for you.
- Do not breastfeed while on this medication and for 1 month after the last dose.

How is this medication given?

- This medication is usually taken once a day by mouth. You may need to take more than 1
 capsule to get the right dose. Talk to your health care team about how and when to take your
 medication.
- Swallow whole with a glass of water, with or without food.
- Do not crush or open the capsules.
- If you miss a dose, skip this and take your next dose as you normally do. Do not take an extra
 dose to make up for the missed dose.
- If you vomit (throw up) after taking your medication, talk to your health care team about what to do.
- If you take too much of your medication by accident, or if you think a child or a pet may have swallowed your medication, you must call the Ontario Poison Control Center right away at: 1-800-268-9017.

To Prevent or Treat Nausea and Vomiting

Anti-nausea medications are used to prevent or stop nausea (feeling like throwing up) and vomiting (throwing up) before they start. You may be given these medications.

• Anti-nausea medications to prevent nausea and vomiting before they start include ondansetron (Zofran®), granisetron (Kytril®), or others.

If you already have nausea and/or vomiting, some anti-nausea medications can stop them from getting worse. You may be given anti-nausea medications to have at home in case you start to feel nausea or if you vomit.

 Anti-nausea medications to stop nausea and vomiting include prochlorperazine (Stemetil®), metoclopramide (Maxeran®), or others.

What else do I need to know while on this medication?

- Will this medication interact with other medications or natural health products?
 - This medication can interact with other medications, vitamins, foods and natural health products. Interactions can make the treatment not work as well or cause severe side effects.
 - Tell your health care team about all of your:
 - prescription and over-the-counter (non-prescription) medications and all other drugs, such as cannabis/marijuana (medical or recreational)
 - natural health products such as vitamins, herbal teas, homeopathic medicines, and other supplements
 - Check with your health care team before starting or stopping any of them.
- What should I do if I 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 <u>Fever</u> 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 lbuprofen (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.

What to DO while on this medication:

- DO check with your health care team before getting any vaccinations, surgery, dental work or other medical procedures.
- DO talk to your health care team about your risk of getting other cancers after this 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.

What NOT to DO while on this medication:

- DO NOT smoke 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, operate machinery or do any tasks that need you to be alert if you feel tired or drowsy.

How should I safely store this medication?

- Do not throw out any unused medications at home. Bring them to your pharmacy to be thrown away safely.
- Keep this medication in the original packaging at room temperature in a dry place, away from heat and light. Keep out of sight and reach of children and pets.
- How to safely touch oral anti-cancer medications

If you are a patient:

Wash your hands before and after touching your oral anti-cancer medication.

Swallow each pill whole. Do not crush or chew your pills.

If you are a caregiver:

- Wear nitrile or latex gloves when touching tablets, capsules or liquids.
- Wash your hands before putting on your gloves and after taking them off, even if your skin did not touch the oral anti-cancer medication.
- Throw out your gloves after each use. Do not re-use gloves.
- Do not touch oral anti-cancer medications if you are pregnant or breastfeeding.
- What to do if oral anti-cancer medication gets on your skin or in your eyes

If medication gets on your skin:

- Wash your skin with a lot of soap and water.
- If your skin gets red or irritated, talk to your health care team.

If medication gets in your eyes:

 Rinse your eyes with running water right away. Keep water flowing over your open eyes for at least 15 minutes.

What are the side effects of this medication?

The following table lists side effects that you may have when getting niraparib. 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 niraparib.

Very Common Side Effects (50 or more out of 100 people)	
Side effects and what to do	When to contact health care team
Low neutrophils (white blood cells) in the blood (neutropenia) (May be severe)	If you have a fever, try to contact your health care team.

	Very Common Side Effects (50 or more out of 100 people)	
Side effects and what to do	When to contact health care team	
When neutrophils are low, you are at risk of getting an infection more easily. Ask your health care team for the Neutropenia (Low white blood cell count) pamphlet for more information. What to look for?	If you are unable to talk to the team for advice, you MUST get emergency medical help right away.	
If you feel hot or unwell (for example if you have chills or a new cough), you must		
 check your temperature to see if you have a fever. Do not take medications that treat a fever before you take your temperature (for example, Tylenol®, acetaminophen, Advil® or ibuprofen). Do not eat or drink anything hot or cold right before taking your temperature. 		
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.		
 Wash your hands often to prevent infection. Check with your health care team before getting any vaccines, surgeries, medical procedures or visiting your dentist. Keep a digital thermometer at home so you can easily check for a fever. 		
If you have a fever:		
talk to the team for advice, you must get emergency medical help right away.		
Low platelets in the blood	Talk to your health care team if you	
(May be severe)	have any signs of	
When your platelets are low, you are at risk for bleeding and bruising. Ask your health care team for the Low Platelet Count pamphlet for more information.	bleeding. If you have bleeding that doesn't stop or is severe (very	
What to look for?	heavy), you MUST get emergency	
Watch for signs of bleeding:	help right away.	

Side effects and what to do	When to contact health care tean
bleeding from your gums	
 unusual or heavy nosebleeds 	
 bruising easily or more than normal 	
 black coloured stools (poo) or blood in your stools (poo) 	
 coughing up red or brown coloured mucus 	
 dizziness, constant headache or changes in your vision 	
 heavy vaginal bleeding 	
o red or pink coloured urine (pee)	
Vhat to do?	
f your health care team has told you that you have low platelets:	
Tell your pharmacist that your platelet count may be low before taking any	
prescriptions or over-the-counter medication.	
Check with your healthcare team before you go to the dentist.	
Take care of your mouth and use a soft toothbrush.	
Try to prevent cuts and bruises.	
 Ask your health care team what activities are safe for you. 	
Your treatment may have to be delayed if you have low platelets. Your health	
care team may recommend a blood transfusion.	
f you have signs of bleeding:	
 If you have a small bleed, clean the area with soap and water or a saline (saltwater) rinse. Apply pressure for at least 10 minutes. 	
f you have bleeding that does not stop or is severe (very heavy), you must jet emergency medical help right away.	
Anemia (low red blood cells)	Talk to your health care team if it
Vhat to look for?	does not improve
You may feel more tired or weaker than normal.	or if it is severe.
Pale skin and cold hands and feet.	
 You may feel short of breath, dizzy or lightheaded. 	
This may occur in days to weeks after your treatment starts.	

Very Common Side Effects (50 or more out of 100 people)	
Side effects and what to do	When to contact health care team
cells):	
 Rest often and eat well. Light exercise, such as walking may help. You may need medication or a blood transfusion. If it is very bad, your doctor may need to make changes to your treatment regimen. 	
Nausea and vomiting	Talk to your
(Generally mild)	healthcare team if nausea lasts more than 48 hours or
What to look for?	vomiting lasts
 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. 	more than 24 hours or if it is severe
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 	

Common Side Effects (25 to 49 out of 100 people)	
Side effects and what to do	When to contact health care team
Fatigue	Talk to your health care team if it
What to look for?	does not improve or if it is severe
 Feeling of tiredness or low energy that lasts a long time and does not go away with rest or sleep. 	of it it is severe
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 <u>Fatigue</u> pamphlet for more information.	
Headache; Mild joint, muscle pain or cramps	Talk to your health care team if it
What to look for?Mild headache	does not improve or if it is severe
New pain in your muscles or joints, muscle cramps, or feeling achy.	
What to do?	
 Take pain medication (acetaminophen or opioids such as codeine, morphine, hydromorphone, oxycodone) as prescribed. Read the above section: "What should I do if I 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 <u>Pain</u> pamphlet for more information.	

Common Side Effects (25 to 49 out of 100 people)	
Side effects and what to do	When to contact health care team
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.	Talk to your health care team if it does not improve or if it is severe
What to do? 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. 	

Less Common Side Effects (10 to 24 out of 100 people)	
Side effects and what to do	When to contact health care team
Trouble Sleeping Your medications may cause trouble sleeping. It may get better once your body gets used to the medication or when your treatment ends.	Talk to your health care team if it does not improve or if it is severe
What to look for?	
 You may find it hard to fall asleep or stay asleep. How well you sleep may change over your treatment. For example, you may have several nights of poor sleep followed by a night of better sleep. You may wake up too early or not feel well-rested after a night's sleep. You may feel tired or sleepy during the day. 	
What to do?	
Talk to your health care team if it does not improve or if it is severe	
 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. 	Talk to your health care team as soon as you notice mouth or lip sores or if it hurts to eat, drink or swallow
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 	

Less Common Side Effects (10 to 24 out of 100 people)	
Side effects and what to do	When to contact health care team
hurts to eat, drink or swallow.	
Ask your health care team for the Oral Care (Mouth Care) pamphlet for more information.	
Low appetite	Talk to your health care team if it
What to look for?	does not improve
Loss of interest in food or not feeling hungry.Weight loss.	or if it is severe
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.	
Cough and feeling short of breath	Talk to your health
What to look for?	care team. If you are not able to talk
You may have a cough and feel short of breath.	to your health care team for advice,
 Symptoms that commonly occur with a cough are: 	and you have a
 wheezing or a whistling breathing 	fever or severe
runny nose	symptoms, you
o sore throat	MUST get
heartburnweight loss	emergency medical help right
• fever and chills	away
 Rarely this may be severe with chest pain, trouble breathing or coughing up blood. 	
What to do?	
 Check your temperature to see if you have a fever. Read the above section "What should I do if I 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. 	

Less Common Side Effects (10 to 24 out of 100 people)	
Side effects and what to do	When to contact health care team
Heartburn; stomach upset; bloating What to look for? Pain or burning in the middle or top part of your chest. It may get worse when you are lying down or bending over or when you swallow. A bitter or acidic taste in your mouth. What to do? Drink clear liquids and eat small meals. Do not eat acidic, fatty or spicy foods. Limit caffeine (like coffee, tea) and avoid alcohol. Avoid smoking or being around tobacco. Sit up or stand after eating. Do not lie down. Raise the head of your bed six to eight inches. You may need to use extra pillows	Talk to your health care team if it does not improve or if it is severe
to do this. High blood pressure What to look for? • There are usually no signs of high blood pressure. • Rarely, you may have headaches, shortness of breath or nosebleeds. What to do?	Talk to your health care team if it does not improve or if it is severe
 Check your blood pressure regularly. Your doctor may prescribe medication to treat high blood pressure. If you have a severe headache get emergency help right away as it may be a sign your blood pressure is too high.	
What to look for? • Loose, watery, unformed stool (poo) that may happen days to weeks after you get your treatment.	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)

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?	
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. 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 <u>Diarrhea</u> pamphlet for more information.	
Dizziness What to look for? • You may feel light-headed and like you might faint (pass out).	Talk to your health care team if it does not improve or if it is severe
What to do?	
 Lay down right away so you do not fall. Slowly get up and start moving once you feel better. Do not drive a motor vehicle or use machinery if you feel dizzy. 	
Taste changes	Talk to your health
What to look for?	care team if it does not improve or if it is severe
Food and drinks may taste different than usual.	
What to do?	
 Eat foods that are easy to chew, such as scrambled eggs, pasta, soups, cooked vegetables. Taste foods at different temperatures, since the flavour may change. Try different forms of foods, like fresh, frozen or canned. Experiment with non-spicy foods, spices and seasonings. 	

Less Common Side Effects (10 to 24 out of 100 people)	
Side effects and what to do	When to contact health care team
Kidney problems	Get emergency
Your health care team may check your kidney function regularly with a blood test.	help right away
What to look for?	
Swelling in your hands, ankles, feet or other areas of your body.	
Weight gain that is not normal for you.	
Pain in your lower back.	
 Muscle twitches and cramps or itchiness that won't go away. Nausea (feeling like you need to throw up) and vomiting. 	
Nausea (leeling like you need to throw up) and vorniting. Changes in urination (peeing) such as less urine than usual.	
G (1 G)	
What to do?	
 If you have any of these signs, talk to your health care team or go to your closest emergency department 	
Hot flashes (feeling or wave of warmth)	Talk to your health
What to look for?	care team if it does not improve
	or if it is severe
A hot flash feels like a sudden warmth in your upper body and face. It can be page guickly and with no warning.	
happen quickly and with no warning.Your face may get flushed (turn red) and you may sweat more.	
Hot flashes can cause you to have trouble sleeping	
What to do?	
To help prevent hot flashes :	
 Avoid triggers such as spicy food, alcohol and caffeine (tea, coffee, and 	
soft drinks),	
 Exercise regularly. Ask your health care team what exercises are appropriate for you before you start any new exercise. 	
 Quitting smoking may also help. 	
If you have hot flashes :	
To keep cool, dress in light, cotton clothing or in layers that you can easily	
remove. Use a fan • Drink planty of water er ether liquids (et least 6 to 8 cups) uplass your	
 Drink plenty of water or other liquids (at least 6 to 8 cups) unless your health care team has told you to drink more or less. 	

Less Common Side Effects (10 to 24 out of 100 people)	
Side effects and what to do	When to contact health care team
 Lay a towel on top of your bed sheet before you sleep so you can change it easily if you sweat at night. 	
Hot flashes may improve over time. Talk to your health care team if they bother you.	
Fast or pounding heartbeat	Talk to your health
What to look for?	care team if it does not improve
You may have a fast, pounding or fluttering heartbeat.	or if it is severe
What to do?	
Talk to your health care team if it does not improve or if it is severe	

Other rare, but serious side effects are possible. If you experience ANY of the following, speak to your cancer health care provider or get emergency medical help right away:

- · seeing or hearing things that are not really there, confusion or memory problems and thinking
- itchiness, rash, swollen lips, face or tongue, chest and throat tightness
- severe belly pain, bloating or feeling of fullness and severe constipation
- severe headache, fainting, seizures, or vision loss

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:				
Other Notes:				

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October 2023 Modified Appearance section

For more links on how to manage your symptoms go to www.cancercareontario.ca/symptoms.

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.