Xermelo

(telotristat ethyl)



New Product Slideshow



Introduction

- Brand name: Xermelo
- Generic name: Telotristat ethyl
- Pharmacological class: Tryptophan hydroxylase inhibitor
- Strength and Formulation: 250mg; tablets
- Manufacturer: Lexicon Pharmaceuticals
- How supplied: Monthly carton—4 x 7 daily dose packs
- Legal Classification: Rx

Xermelo



Indications

 In combination with somatostatin analog (SSA) therapy, to treat carcinoid syndrome diarrhea in adults inadequately controlled by SSA therapy

Dosage & Administration

Take with food

250mg 3 times daily

Considerations for Special Populations

- Pregnancy: No human data with Xermelo use in pregnant women to inform a drugassociated risk
- Nursing mothers: Monitor infant for constipation
- Pediatric: Not established
- Elderly: No overall differences in safety or efficacy were observed
- Renal impairment: ESRD requiring dialysis: not studied

Warnings/Precautions

 Monitor for constipation and/or severe, persistent, or worsening abdominal pain; discontinue if develops

Adverse Reactions

- Nausea
- Headache
- Increased GGT
- Depression
- Flatulence
- Decreased appetite
- Peripheral edema
- Pyrexia

Interactions

- May antagonize CYP3A4 substrates
 (eg, midazolam); monitor and consider
 increasing dose of concomitant
 substrates if necessary
- Antagonized by short-acting octreotide; if concomitant use is necessary, give dose ≥30mins after Xermelo

Pharmacokinetics

 Distribution: >99% bound to human plasma proteins

 Metabolism: Hydrolysis via carboxylesterases; not a substrate for CYP enzymes

Elimination: Fecal

Mechanism of Action

- Telotristat, the active metabolite of telotristat ethyl, is an inhibitor of tryptophan hydroxylase, which mediates the rate limiting step in serotonin biosynthesis
- Serotonin plays a role in mediating secretion, motility, inflammation, and sensation of the gastrointestinal tract, and is over-produced in patients with carcinoid syndrome
- Telotristat and telotristat ethyl reduce the production of peripheral serotonin and the frequency of carcinoid syndrome diarrhea

A 12-week, double-blind, placebocontrolled, randomized, multicenter trial of Xermelo was conducted in adults with a well-differentiated metastatic neuroendocrine tumor and carcinoid syndrome diarrhea who were having 4-12 daily bowel movements despite the use of SSA therapy at a stable dose for at least 3 months

- Patients were randomized to placebo or Xermelo 250mg three times daily
- All patients were required to maintain their baseline SSA regimen and were allowed to use rescue medication (short-acting octreotide) and antidiarrheals for symptomatic relief
- 90 patients were evaluated for efficacy

- The primary efficacy endpoint was the change from baseline in the number of daily bowel movements averaged over the 12-week treatment period
- There was a mean change of -1.4/day in the Xermelo group vs. -0.6/day in the placebo group averaged over 12 weeks
 - Estimated treatment difference -0.8 (97.5% CI: -1.3, -0.3)

- A difference in average weekly reductions in bowel movement frequency between Xermelo and placebo was seen as early as 1–3 weeks, and persisted for the remaining 9 weeks of the study
- The average number of daily short-acting octreotide injections used for rescue therapy over the 12-week treatment period was 0.3 in the Xermelo group vs. 0.7 in the placebo group
- For more clinical trial data, see full labeling

New Product Monograph

 For more information view the product monograph available at:

http://www.empr.com/xermelo/drug/34651/