Alecensa

(alectinib)

New Product Slideshow

MPR

Introduction

- **Brand name:** Alecensa
- **Generic name:** Alectinib
- **Pharmacological class:** Kinase inhibitor
- **Strength and Formulation:** 150mg; capsules
- **Manufacturer:** Genentech
- **How supplied:** Bottle—240
- **Legal Classification:** Rx

ALECENSA


NDC 50242-130-01
Alecensa®
(alectinib)
capsules
150 mg
Each capsule contains 150 mg of alectinib
(equivalent to 161.33 mg alectinib HCl).
℞ only
240 capsules
Genentech
NDC 50242-130-01
Alecensa®
(alectinib) capsules
150 mg
℞ only
240 capsules
Genentech

Indications

- Treatment of patients with anaplastic lymphoma kinase (ALK)-positive, metastatic **non-small cell lung cancer (NSCLC)** who have progressed on or are intolerant to crizotinib

Dosage & Administration

- Swallow whole
- Take with food
- 600mg twice daily until disease progression or unacceptable toxicity
- Dose modifications or dose reduction schedule: see full labeling

Considerations for Special Populations

- **Pregnancy:** Can cause fetal harm
- **Nursing mothers:** Not recommended during and for 1 week after final dose
- **Pediatric:** Not established
- **Geriatric:** Insufficient number studied
- **Hepatic impairment:** Severe impairment: not studied
- **Renal impairment:** Severe impairment or ESRD: not studied

Warnings/Precautions

- Monitor **liver function tests** (eg, ALT, AST, total bilirubin) every 2 weeks for the first 2 months, then periodically during treatment; test more frequently if transaminase and bilirubin elevated; withhold, resume at reduced dose, or permanently discontinue based on severity
- Evaluate if presence of worsening **respiratory symptoms**; withhold if ILD/pneumonitis diagnosed; permanently discontinue if no other cause identified

Warnings/Precautions

- Monitor HR, BP regularly
- If non-life-threatening symptomatic **bradycardia** occurs, withhold until asymptomatic or HR ≥60bpm; permanently discontinue in case(s) of recurrence or life-threatening bradycardia if no contributing concomitant medication identified
- Assess **CPK** every 2 weeks for the first month and as clinically indicated; withhold, resume, or reduce dose based on severity

Warnings/Precautions

- **Females** of reproductive potential should use effective contraception during treatment and for 1 week after final dose; **males** should use effective contraception during treatment and for 3 months after final dose

Interactions

- Increased **bradycardia** with concomitant antihypertensives or other drugs known to cause bradycardia

Adverse Reactions

- Fatigue
- Constipation
- Edema
- Myalgia
- Hepatotoxicity
- ILD/pneumonitis
- Bradycardia
- CPK elevation
- Embryo-fetal toxicity

Mechanism of Action

- Alectinib is a tyrosine kinase inhibitor that targets ALK and RET
- In nonclinical studies, alectinib inhibited ALK phosphorylation and ALK-mediated activation of the downstream signaling proteins STAT3 and AKT, and decreased tumor cell viability in multiple cell lines harboring ALK fusions, amplifications, or activating mutations
- M4, its major active metabolite, also showed similar *in vitro* potency and activity

Pharmacokinetics

- **Distribution:** Highly bound (>99%) to plasma proteins
- **Metabolism:** CYP3A4 (major)
- **Elimination:** Fecal

Clinical Trials

- The safety and efficacy of Alecensa were established in two single-arm, multicenter clinical trials (Studies 1 and 2)
- Patients with locally advanced or metastatic ALK-positive NSCLC, who have progressed on crizotinib, with documented ALK-positive NSCLC based on an FDA-approved test, and ECOG performance status of 0–2 were enrolled in both studies
- All 225 patients received Alecensa 600mg twice daily

Clinical Trials

- The **major efficacy outcome** measure in both studies was objective response rate (ORR) according to RECIST v1.1 as evaluated by an Independent Review Committee (IRC)
- Additional outcome measures included duration of response (DOR), central nervous system (CNS) ORR, and CNS DOR

Clinical Trials

- In **Study 1,** ORR was seen in 38% of patients (95% CI: 28, 49) with a median 7.5 months DOR as per IRC assessment

- In **Study 2,** ORR was seen in 44% of patients (95% CI: 36, 53) with a median 11.2 months DOR as per IRC assessment

Clinical Trials

- An assessment of ORR and DOR for CNS metastases in the subgroup of 51 patients in Studies 1 and 2 with baseline measurable lesions in the CNS according to RECIST v1.1 showed a 61% CNS ORR (95% CI: 46, 74)
- A complete response was seen in 18% of patients and a partial response in 43% of patients
- The CNS DOR was a median 9.1 months
- For more clinical trial data, see full labeling

New Product Monograph

- For more information view the product monograph available at:

http://www.empr.com/alecensa/drug/34527/