

CEMIPLIMAB (Libtayo)

INDICATION (ICD10) C43

Check the most recent Blumetq eligibility criteria before prescribing. Blumetq registration required. (www.england.nhs.uk/publication/national-cancer-drugs-fund-list/) (CEM1)

1. Cemiplimab monotherapy for the treatment of adult patients with locally advanced or metastatic cutaneous squamous cell carcinoma and is not a candidate for curative surgery or curative radiotherapy or metastatic disease with spread that includes distant metastasis (eg lung, liver, bone etc). Not received prior treatment with an anti-PD-1, anti-PD-L1, anti-PD-L2, anti-CD137, or anti-Cytotoxic T-lymphocyte-associated antigen-4 (CTLA-4) antibody. No symptomatically active brain metastases or leptomeningeal metastases. PS 0 or 1. (TA802)

REGIMEN

Day 1 CEMIPILIMAB 350mg in 100ml sodium chloride IV infusion over 30 minutes

CYCLE FREQUENCY AND NUMBER OF CYCLES

Every 21 days until disease progression up to a maximum of 2 years (35 cycles).

A formal medical review as to whether treatment with cemiplimab should continue or not will be scheduled to occur at least by the end of the first 6 weeks of treatment.

ANTI-EMETICS

Low emetic risk

CONCURRENT MEDICATION REQUIRED

None

EXTRAVASATION AND TYPE OF LINE / FILTERS

Cemiplimab - neutral

Use non pyrogenic, low protein binding 0.2 to 5micron in-line or add-on filter.

Peripheral line

INVESTIGATIONS

Blood results required before SACT administration

FBC, U&E and LFTs every cycle

Neutrophils x 10⁹/L ≥1.5

Platelets x 10⁹/L ≥100

Thyroid function baseline, then every cycle

Random cortisol baseline, then every cycle

Random glucose every cycle

Baseline weight and every cycle

MAIN TOXICITIES AND ADVERSE REACTIONS

Cemiplimab	Immune related toxicities - pneumonitis, colitis or hepatitis, severe cutaneous adverse reactions etc
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INTERACTIONS WHICH MAY REQUIRE DOSE MODIFICATIONS

(not exhaustive list check SPC/BNF/Stockleys)

Cemiplimab	-
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DOSE MODIFICATIONS

Non-haematological

Cemiplimab

Immune-related adverse reactions - refer to TV immune-oncology agent immune related adverse event clinical guideline.

Hepatic impairment

Cemiplimab

No dose adjustment is recommended for patients with mild or moderate hepatic impairment. Cemiplimab has not been studied in patients with severe hepatic impairment.

Renal impairment

Cemiplimab

No dose adjustment of cemiplimab is recommended for patients with renal impairment. Cemiplimab has not been studied in patients CrCl <21ml/min.

REFERENCES

1. Migden, M et al; NEJM 2018; 379: 341–351
2. SPC