## Samford University McWhorter School of Pharmacy

#### CENTER FOR HEALTHCARE INNOVATION AND PATIENT OUTCOMES RESEARCH

# NEW DRUG FAX SHEET



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This issue of *New Drug FAX Sheet* briefly reviews topics that include new drug approvals, new drug formulations, and new drug indications. If you need further information, please contact the Center for Healthcare Innovation and Patient Outcomes Research (CHIPOR) at chipor@samford.edu.

#### **NEW DRUG APPROVALS**

#### Olaratumab (Lartruvo, Eli Lilly and Co)

Pharmacology: Antineoplastic agent, monoclonal antibody, PDGFR-alpha blocker.

<u>Indication</u>: Treatment, in combination with doxorubicin, for adult patients with soft tissue sarcoma (STS) with a histologic subtype for which an anthracycline-containing regimen is appropriate and which is not amenable to curative treatment with radiotherapy or surgery.

Adverse Drug Reactions: Nausea, fatigue, musculoskeletal pain, mucositis, alopecia, vomiting, diarrhea, decreased appetite, abdominal pain, neuropathy, headache, lymphopenia, neutropenia, thrombocytopenia, hyperglycemia, elevated aPTT, hypokalemia, and hypophosphatemia.

<u>Dose</u>: Administer Olaratumab at 15 mg/kg as an intravenous infusion over 60 minutes on Days 1 and 8 of each 21-day cycle until disease progression or unacceptable toxicity.

Formulation: Solution for intravenous infusion in a 500 mg/50 mL single-dose vial.

Warnings/Contraindications: Infusion-related reactions, embryo-fetal toxicity.

Notes: Patients should receive intravenous diphenhydramine and dexamethasone prior to olaratumab administration.

#### Bezlotoxumab (Zinplava, Merck Sharp Dohme)

Pharmacology: Monoclonal Antibody.

<u>Indication</u>: To reduce recurrence of *Clostridium difficile* infection (CDI) in patients ≥18 years of age who are receiving antibacterial drug treatment of CDI and are at a high risk for CDI recurrence.

Adverse Drug Reactions: Nausea, pyrexia, and headache.

<u>Dose</u>: 10 mg/kg IV as a single dose during antibacterial treatment for *Clostridium difficile* infection.

<u>Formulation</u>: Solution (25 mg/mL) for intravenous infusion.

<u>Warnings/Contraindications</u>: Heart failure was reported more commonly with bezlotoxumab compared to placebo in clinical trials.

Notes: This drug is not an anti-bacterial agent. The product must be infused over 60 minutes using a sterile, nonpyrogenic, low protein biding 0.2 micron to 5 micron in-line or add-on filter.

#### **NEW DRUG FORMULATIONS**

#### Carbamazepine (Carnexiv, Lundbeck LLC)

<u>Pharmacology</u>: Anticonvulsant.

<u>Indication:</u> Replacement therapy for oral carbamazepine formulations, when oral administration is temporarily not feasible.

Dosage form: Solution for intravenous infusion in a single-dose vial.

Dose: 200 mg/20 mL (10 mg/mL) single-dose vial.

#### Mebendazole (Vermox, Janssen Pharms)

Pharmacology: Anthelmintic.

<u>Indication</u>: Intestinal nematode infection. <u>Dosage form</u>: Chewable oral tablet.

Dose: 500 mg.

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### **NEW DRUG FORMULATIONS (CONTINUED)**

#### Naloxone Hydrochloride (Evzio, Kaleo Inc.)

Pharmacology: Opioid antagonist.

<u>Indication</u>: Emergency treatment of known or suspected opioid overdose. Dosage form: Naloxone hydrochloride solution in a pre-filled auto-injector.

Dose: 0.4 mg/0.4 mL

#### **NEW DRUG INDICATIONS**

#### Atezolizumab (Tecentriq, Genentech Inc.)

<u>Pharmacology</u>: Antineoplastic agent, anti-pd-I1 monoclonal antibody. <u>New Indication</u>: Locally advanced or metastatic urothelial carcinoma.

<u>Dose</u>: 1,200 mg administered IV every 3 weeks; continue until disease progression or unacceptable toxicity.

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