

Kadcyla[®]: HCP Educational Information

EU Healthcare Professional Information

September 2018

WARNING:

Risk of confusion between Kadcyla and Herceptin
During the prescription, preparation and administration processes
Confusion can lead to overdose, undertreating and/or toxicity

Kadcyla:

Kadcyla is an antibody–drug conjugate containing humanised anti-HER2 IgG1 antibody trastuzumab linked to DM1, a microtubule-inhibitory maytansinoid. **Emtansine refers to the combination of the linker and DM1.**

Indication

Kadcyla, as a single agent, is indicated for the treatment of adult patients with **HER2-positive, unresectable, locally advanced or metastatic breast cancer** who previously received trastuzumab and a taxane, separately or in combination.




Patients should have either:

- Received prior therapy for locally advanced or metastatic disease, or
- Developed disease recurrence during or within 6 months of completing adjuvant therapy.

Important information:

- Kadcyla and Herceptin are two **different** products with **different** active substances
- Kadcyla and Herceptin are not interchangeable
- Kadcyla (**trastuzumab emtansine**) is **not** a generic version or biosimilar of Herceptin- (trastuzumab)
- Do not administer Kadcyla in combination with trastuzumab or with a chemotherapy
- Do not administer Kadcyla at doses greater than 3.6 mg/kg q3w

Overview of Herceptin, Herceptin SC & Kadcyla: Differences and similarities

Trademark	 Herceptin trastuzumab	 Herceptin SC trastuzumab subcutaneous	 Kadcyla trastuzumab emtansine
Indication	HER2-positive BC HER2-positive MGC	HER2-positive BC	HER2-positive MBC
INN	trastuzumab	trastuzumab	trastuzumab emtansine
Dose (q3w)	8 mg/kg LD - 6 mg/kg	Fixed dose of 600 mg	3.6 mg/kg
Form	Powder	Solution	Powder
Vial content	440 mg	600 mg	100 mg and 160 mg
Vial size	20 ml	5 ml	15 ml and 20 ml

BC, breast cancer; LD, loading dose; MBC, metastatic breast cancer; MGC, metastatic gastric or gastro-oesophageal junction adenocarcinoma.

Avoiding errors: Physicians/prescription phase

Due to the similar INN (trastuzumab vs **trastuzumab emtansine**) errors can occur when prescribing.

Electronic systems: Potential areas of confusion

Medication	Strength
Trastuz	
Trastuzumab	150 mg
Trastuzumab emtansine	100 mg
Trastuzumab emtansine	150 mg

Medication	Strength
Trastuz	
Trastuzumab	150 mg
Trastuzumab	100 mg
Trastuzumab	150 mg

Medication search

Trastuzuma

Alphabetical name sorting	Name truncation & Limited text field
Trastuzumab and trastuzumab emtansine may be positioned one after the other	If the system only displays part of the medication name in its drop-down menu or text window (e.g. "trastuzumab" for Herceptin and Kadcylla)

Written prescriptions: Potential areas of confusion




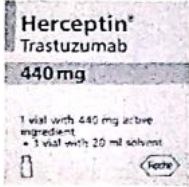

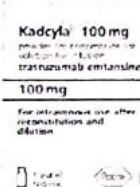
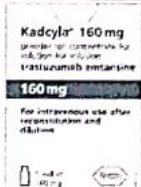

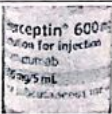

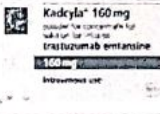




Both Kadcylla and **trastuzumab emtansine** should always be used when prescribing.

Example	Do <u>not</u> truncate either name
Kadcylla (trastuzumab emtansine) Trastuzumab emtansine (Kadcylla)	Kadcylla (trastuzumab e) Kadcylla (trastuzumab) Trastuzumab e

Mitigation measures

- Prescribers must familiarise themselves with the Kadcylla SmPC
- Refer to Kadcylla and **trastuzumab emtansine** when discussing the drug with the patient
- Electronic systems
 - Check correct medication before clicking
 - Always select the correct medication in the electronic medical record
 - Ensure the medication prescribed is Kadcylla, **trastuzumab emtansine**, and not trastuzumab
 - Request use of brand names, where possible
- Written prescriptions
 - Ensure that both Kadcylla and **trastuzumab emtansine** are written on the prescription and in the patient notes
 - Do not abbreviate, truncate or omit any name
 - Ensure the correct medication is clearly recorded in the patient history

Avoiding errors: Pharmacists/preparation phase

Trademark	 Herceptin trastuzumab	 Herceptin SC trastuzumab subcutaneous	 Kadcyla trastuzumab emtansine	
Content	440 mg	600 mg	100 mg	160 mg
Carton image & colours				
Label colours				
Cap colour				
Distinctive colours	Dark orange/ <u>green</u>	Dark orange/ light blue	Yellow/ white	Yellow/ purple

Potential mitigation measures:

- Pharmacists must familiarise themselves with the Kadcyla SmPC
- Check that protocols to avoid medication errors are in place at the hospital/site and that they are followed
- Be aware when reading prescriptions that there are three types of medication with a similar INN (trastuzumab, trastuzumab SC and trastuzumab emtansine)
- Double check the intended medication is Kadcyla, **trastuzumab emtansine**, and that both are entered in the prescription and/or medical history
- In case of any doubt, consult with the treating physician
- Familiarise yourself with the different cartons, labels and cap colours to select the correct carton
- Ensure the correct medication is ordered from the wholesaler and that the correct medication is received in the pharmacy
- Store Kadcyla in a different place in the fridge to Herceptin IV and Herceptin SC

Avoiding errors: Nurses/administration phase

Potential mitigation measures:

- Nurses must familiarise themselves with the Kadcyła SmPC. Ensure that protocols to avoid medication errors are in place at the hospital/site and that they are followed
- Check both the prescription and patient notes to ensure that Kadcyła and **trastuzumab emtansine** have been recorded as the prescribed medication
- On receipt of the infusion bag, check the label on the infusion bag against the prescription **and** patient notes
- Consider using a two nurse double-checking system prior to infusion to ensure that the appropriate product and dosage is administered
- Refer to both Kadcyła and **trastuzumab emtansine** when discussing the drug with the patient
- Do not administer Kadcyła at doses greater than 3.6 mg/kg q3w
- Familiarise yourself with the Kadcyła dose modification for toxicities

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