Tarlatamab



Care Team Contact In	formation:
Pharmacy Contact Inf	ormation:
Diagnosis:	
This treatment	is often used for certain types of lung cancer, but it may also be used for other diagnoses.
Goal of Treatment:	

Treatment Regimen

Treatment Name	How the Treatment Works	How the Treatment is Given
Tarlatamab (tar-LA-tah-mab): Imdelltra (im-del-trah)	Binds immune cells (T-cells) and cancer cells together so T-cells can more effectively attack and destroy the cancer cells.	Infusion given into a vein.

Treatment Administration and Schedule: Treatment is usually given every 4 weeks. This is called a "cycle".

Due to the risk of cytokine release syndrome (CRS), you will receive tarlatamab on a "step-up dosing schedule".

Treatment may continue for a certain time period, until it no longer works, or until side effects are no longer controlled.

- The step-up dosing schedule is when you receive a smaller dose on Day 1 of your first treatment cycle (Cycle 1). You will receive the full treatment dose of tarlatamab on Day 8 and Day 15 of Cycle 1.
- You will receive the full treatment dose 1 time every 2 weeks after Day 15 of Cycle 1.

Cycle Number	Day 1	 Day 8	 Day 15	 Day 28
Cycle 1	✓ (Step-up Dose)	✓ (First Treatment Dose)	✓	
Cycles 2+	✓		✓	

Due to the risk of CRS and neurologic problems you will receive the following monitoring during treatment.

Note: The time that you are monitored may be different than the times listed below.

- For Day 1 and Day 8 of cycle 1 doses, your care team will monitor you for 22 to 24 hours from the start of the tarlatamab infusion in an appropriate healthcare setting that can manage these side effects. You should remain within 1 hour of an appropriate healthcare setting for a total of 48 hours from the start of the tarlatamab infusion after your day 1 and day 8 of cycle 1 doses and be accompanied by a caregiver.
- For Day 15 of Cycle 1 and Cycle 2 doses, your care team will watch you for 6 to 8 hours after the tarlatamab infusion.
- For Cycle 3 and Cycle 4 doses, your care team will watch you for 3 to 4 hours after the tarlatamab infusion.
- For Cycle 5 and later doses, your care team will watch you for 2 hours after the tarlatamab infusion.









Appointments: Appointments may include regular check-ups with your care team, treatment appointments, and lab and imaging visits. It's important to keep your appointments whenever you can. If you miss any appointments, call your care provider as soon as possible to reschedule your appointment.

Supportive Care to Prevent and Treat Side Effects

Description	Supportive Care Given in the Clinic or Hospital	Supportive Care Taken at Home
To help lower the risk of		
Cytokine Release Syndrome		
(CRS)		
Other		

Common Side Effects

Side Effect	Important Information	
Cytokine Release Syndrome	Description: CRS happens when your immune system becomes overactive. Most CR few doses. However, some CRS events can be serious and life-threatening. Symptor lightheaded, or difficulty breathing.	* * * * * * * * * * * * * * * * * * * *
(CRS) (Boxed Warning)	 Recommendations: Keep a symptom diary to record any new or worsening symptoms such as fever, chills, fatigue, or difficulty breathing. Check vital signs regularly, including temperature, blood pressure, and heart rate. Stay hydrated by drinking plenty of fluids to help manage symptoms and support overall health. Your care team may prescribe medications to help manage symptoms. 	Talk to your care team if you have: • Fever of 100.4°F (38°C) • Dizziness or light- or higher • Low blood pressure • Trouble breathing • Chills Note: Your care team may have specific numbers for blood pressure, heart rate, and blood oxygen levels. If your numbers go beyond those limits, call your care team or get emergency help right away.







Low White Blood Cell (WBC)	Description: WBCs help protect the body against infections. If you have a low WBC count, you may have a higher risk of infection.					
Count and Increased Risk of Infection	Recommendations: Wash your hands and bathe regularly. Avoid crowded places. Stay away from people who are sick. Your care team may prescribe a drug that promotes the growth of WBCs.	Talk to your care team if you have: Fever of 100.4°F (38°C) or higher Chills Cough Sore throat Painful urination Shortness of breath				
Low Red Blood Cell (RBC) Count and Hemoglobin (Hgb)	Description: RBCs and Hgb help bring oxygen to your body's tissues and take away of tired, or look pale. Recommendations: Get 7 to 8 hours of sleep each night. Avoid operating heavy machinery when tired. Balance work and rest, staying active but resting when needed.	carbon dioxide. If you have low RBC counts or Hgb, you might feel weak, Talk to your care team if you have: Shortness of breath Dizziness Fast or abnormal heartbeats Severe headache				
Low Platelet Count	Description: Platelets help the blood clot and heal wounds. If you have low platelet confidence in the platelet seems and a solution in the platelet seems and	Talk to your care team if you have: Nosebleed lasting over 5 minutes despite pressure Cut that continues to bleed Significant gum bleeding when flossing or brushing Severe headaches Blood in your urine or stool Blood in your spit after a cough				
Liver Problems	Description: Treatment can harm your liver. This may cause nausea, stomach pain, a make your urine dark. Lab tests may be performed to monitor liver function. Talk to your care team if you have: • Yellowing of the skin or whites of your eyes • Dark or brown urine • Bleeding or bruising	 Tiredness that is worse than normal Loss of appetite Pain in the right upper stomach area 				









Constipation	Description: Constipation means having a hard time passing stools or not going to the bathroom often. Your stools might feel hard and dry, which can make you uncomfortable or hurt.		
	Recommendations:	 Talk to your care team if you have: Constipation that lasts 3 or more days Constipation after 48 hours even after using a laxative 	
Taste Changes	Description: Taste changes, such as loss of taste or taste sensitivity, may occur as a repealing or certain tastes, such as metallic tastes, may become more noticeable Recommendations: Choose appealing foods based on appearance and smell. Use plastic utensils if food tastes metallic. Add spices or juices to enhance food flavors. Suck on mints or chew gum to improve taste. Brush your teeth before and after eating with a soft toothbrush. Avoid smoking.	* * *	
Fatigue	 Description: Fatigue is a constant and sometimes strong feeling of tiredness. Recommendations: Routine exercise has been shown to decrease levels of fatigue. Work with your care team to find the right type of exercise for you. Ask your family and friends for help with daily tasks and emotional support. Try healthy ways to feel better, like meditation, writing in a journal, doing yoga, and using guided imagery to lower anxiety and feel good. Make a regular sleep schedule and limit naps during the day so you can sleep better at night, aiming for 7 to 8 hours of sleep. Don't use heavy machines or do things that need your full attention if you're very tired to avoid accidents. 	Talk to your care team if you have: Tiredness that affects your daily life Tiredness all the time and it doesn't get better with rest Dizziness and weakness along with being tired 	









Low Appetite

Description: Low appetite means you don't feel like eating as much as usual. It's important to get enough nutrition and maintain a healthy weight because protein and calories are essential for recovery and feeling good.

Recommendations:

- Be as active as possible. Do some physical activity before a meal. Before starting an exercise program, consult with your care team.
- Take note of the times during the day when your appetite is best. Do not limit food when your appetite is good. Eat your largest meal when you feel the hungriest, whether it is breakfast, lunch, or dinner.
- Eat 5-6 small meals per day and snack anytime.
- Choose foods high in protein, such as beans, chicken, fish, meat, yogurt, tofu, and eggs. During meals, eat high-protein foods first.
- Choose foods that are high in calories. Do not select foods that are labeled "low-fat," "fat-free" or "diet."
- Keep snacks nearby so you can snack at any time.
- If you feel full quickly when eating, do not drink any liquids 30 minutes before a meal, so you have more room for solid food. Then, drink liquids between meals. Choose liquids with extra calories, not diet drinks.
- Eat a bedtime snack. Choose something easy to digest, such as peanut butter and crackers. If you tend to experience reflux or heartburn, eat at least an hour before lying down.
- If food is not appealing, try a nutritious beverage, such as a high protein shake or smoothie, instead of solid food.
- Ask your care team to recommend a liquid nutrition supplement (for example, Boost®, Ensure®, or generic versions). Add a scoop of protein powder, yogurt, or ice cream for added protein and calories.

Talk to your care team if you have:

- Severe weight loss
- Weight loss with fatigue or weakness

Muscle or Joint Pain or Weakness

Description: Muscle pain feels like soreness, aches, cramps, or stiffness in one or more muscles. It may also include tenderness or weakness. Joint pain happens where two bones come together and can feel sharp, dull, throbbing, or burning. It often causes stiffness, swelling, and difficulty moving.

Recommendations:

- Track your pain levels, areas of discomfort, and any activities that worsen or improve your symptoms.
- Engage in gentle exercises like walking, stretching, or yoga to maintain mobility and strength, but consult your care team before starting any new exercise routine.
- Apply a warm compress to relax stiff muscles or use cold packs to reduce swelling and numb pain in affected areas.
- Your care team may prescribe or recommend medications, including overthe-counter pain relievers.

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Select Rare and Serious Side Effects

Side Effect	Talk to Your Care Team if You Have Any of These Signs or Symptoms		
Neurologic Problems (Boxed Warning) This includes Immune Effector Cell-Associated Neurotoxicity Syndrome (ICANS)	 Headache Agitation, trouble staying awake, confusion or disorientation, seeing or hearing things that are not real (hallucinations) Trouble speaking, thinking, remembering things, paying attention, or understanding things 	 Problems walking, muscle weakness, shaking (tremors), loss of balance, or muscle spasms Numbness and tingling (feeling like "pins and needles") Burning, throbbing, or stabbing pain Changes in your handwriting 	
Allergic reactions	 Shortness of breath or trouble breathing Pain or tightness in your chest and back Wheezing 	CoughingFeeling lightheaded or dizzyRash	

Before starting treatment, ask your care team when to call 9-1-1 or seek emergency help.

If you experience any new, worsening, or uncontrolled side effects, contact your care team immediately.

Intimacy, Pregnancy, and Breastfeeding

- Treatment may change how you feel about intimacy and your body. However, physical closeness—such as holding hands and hugging—remains safe. It is common to have questions about intimacy. If needed, talk to your care team for guidance.
- Treatment may harm an unborn baby.
 - If you might get pregnant, take a pregnancy test before starting treatment.
 - Use an effective method of birth control during treatment and for 2 months after your last dose.
 - O If you think you might be pregnant or if you become pregnant, tell your care team right away.
 - If your partners could be pregnant, use an effective method of birth control—such as condoms—during treatment.
- **Do NOT breastfeed** during treatment and for 2 months after your last dose.

Additional Information

- Tell your care team about all the medicines you take.
 - This includes prescriptions, over-the-counter drugs, vitamins, and herbal products. Before starting any new medicine, supplement, or vaccine, ask your care team first.
- The most common severe changes in laboratory test results are decreased white blood cells, decreased sodium, increased uric acid, decreased red blood cells, increased blood clotting time, decreased potassium, increased liver enzymes, and decreased platelets.
- Your care team will monitor you for **signs and symptoms of CRS and neurologic problems** during treatment with tarlatamab, as well as other side effects and treat you if needed. Your care team may temporarily stop or completely stop your treatment with tarlatamab if you develop CRS, neurologic problems, or any other side effects that are severe.
- Do not drive or use heavy machines during your treatment if you feel dizzy, confused, shaky, or sleepy. These can be signs of neurologic problems.
- This Patient Education Sheet may not describe all possible side effects.

 Call your healthcare provider for medical advice about side effects. You may report side effects to the FDA at 1-800-FDA-1088.









Notes

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Scan the QR code below to access this education sheet.



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