Tebentafusp

Patient Education Sheets
Understanding Your Cancer Treatment

Care Team Contact Information: _____

Pharmacy Contact Information: _____

Diagnosis: _____

- This treatment is often used for certain types of eye cancer, but it may also be used for other diagnoses.
- Your healthcare provider will test you for the presence of a specific gene (HLA-A*02:01) to make sure tebentafusp is right for you.

Goal of Treatment: _____

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

Treatment Regimen

Treatment Name	How the Treatment Works	How the Treatment is Given
Tebentafusp (teh-BEN-tah-fusp): Kimmtrak (KIM-trak)	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: Tebentafusp is usually given every week.

Due to the risk of cytokine release syndrome (CRS):

- You will receive tebentafusp on a "**step-up dosing schedule**". The step-up dosing schedule is when you receive smaller "step-up" doses followed by your first full treatment dose. Tebentafusp has two step-up doses followed by the first full treatment dose on Day 15 (Week 3's dose).
- Your healthcare provider may keep you under observation for at least 16 hours following the first three tebentafusp treatments and for at least 30 minutes after future treatments.

Step-up Dosing Schedule (First 3 Doses)

Day 1	…	Day 8	…	Day 15
✓ (Step-up Dose 1)		✓ (Step-up Dose 2)		✓ (First Treatment Dose)

Followed by Weekly Dosing (Maintenance Dosing)

Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
✓						

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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 (CRS) (Boxed Warning)	Description: CRS happens when your immune system becomes overactive. Most CRS events are mild, get better with treatment, and happen during the first few doses. However, some CRS events can be serious and life-threatening. Symptoms can include fever, chills, fatigue, headache, dizziness or feeling lightheaded, or difficulty breathing. 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) or higher • Low blood pressure • Trouble breathing • Chills • Dizziness or light-headedness • Fast heartbeat • Headache 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.

Skin Problems	Description: Treatment can cause a rash with itchy, dry, red, or puffy skin. Recommendations: • Keep your skin moisturized with creams or lotions to reduce rash and itchiness; wear loose-fitting clothing. • Avoid perfumes and colognes. • Limit time spent in heat to prevent worsening symptoms. • Avoid sun exposure, especially between 10 AM and 4 PM, to lower the risk of sunburn. • Wear long-sleeved clothing with UV protection and broad-brimmed hats. • Apply broad-spectrum sunscreen (UVA/UVB) with at least SPF 30 as directed. • Use lip balm that contains at least SPF 30. • Avoid tanning beds. • Your care team may recommend using over-the-counter antihistamines or topical creams. Talk to your care time if you have: • Rash or itching that continues to worsen
Swelling or Fluid Retention	Description: Swelling and fluid retention (edema) can occur in different areas of the body. You might notice areas feel puffy or tighter than usual. Recommendations: • Keep a daily log of swelling and note any changes in size or location. • Elevate swollen limbs when resting. • Limit salt intake. • Stay active with regular, gentle exercises. • Avoid prolonged periods of sitting or standing without movement. Talk to your care team if you have: • Swelling that suddenly worsens or spreads to other areas. • Pain, redness, or warmth in the affected area. • Signs of shortness of breath or difficulty breathing • Swelling is persistent and does not improve with home management. • Unexpected weight gain Note: You care team may ask you to contact them if your weight increases by a certain amount over a certain time period.
Liver Problems	Description: Treatment can harm your liver. This may cause nausea, stomach pain, and bleeding or bruising. It can also turn your skin and eyes yellow and 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

Nausea and Vomiting	Description: Nausea is an uncomfortable feeling in your stomach or the need to throw up. This may or may not cause vomiting. Recommendations: • Your care provider may prescribe medicine for these symptoms. • Eat smaller, more frequent meals. • Avoid fatty, fried, spicy, or highly sweet foods. • Eat bland foods at room temperature and drink clear liquids. • If you vomit, start with small amounts of water, broth, or other clear liquids when you are ready to eat again. If that stays down, then try soft foods (such as gelatin, plain cornstarch pudding, yogurt, strained soup, or strained cooked cereal). Slowly work up to eating solid food. Talk to your care team if you have: • Vomiting for more than 24 hours • Vomiting that's nonstop • Signs of dehydration (like feeling very thirsty, having a dry mouth, feeling dizzy, or having dark urine) • Blood or coffee-ground-like appearance in your vomit • Bad stomach pain that doesn't go away after vomiting
Stomach (Abdominal) Pain	Description: Abdominal pain is when you feel discomfort or pain in the belly area. Talk to your care team if you have: • Severe abdominal pain
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

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 1 week after your last dose.
  - 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 1 week 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** during treatment with tebentafusp, as well as other side effects and treat you if needed. Your care provider may temporarily stop or completely stop your treatment with tebentafusp if you develop CRS or any other side effects that are severe.
- **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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