

Tafinlar 50mg and 75mg, hard capsules :הנדון:
טפינלר 50מ"ג ו 75מ"ג, כמוסות קשותהתכשירים שבנדון רשומים בישראל להתוויות הבאות:

- Melanoma: Dabrafenib as monotherapy or in combination with trametinib is indicated for the treatment of adult patients with unresectable or metastatic melanoma with a BRAF V600 mutation.
- Non-small cell lung cancer (NSCLC): Dabrafenib in combination with trametinib is indicated for the treatment of adult patients with advanced non-small cell lung cancer with a BRAF V600 mutation.

Dabrafenib (as mesilate) : המרכיב הפעיל:

ברצוננו להודיעכם על עדכונים בעלון לרופא ובעלון לצרכן של התכשירים בנדון.

העלונים נשלחו לפרסום במאגר התרופות שבאתר משרד הבריאות, וניתן לקבלם מודפסים על-ידי פניה לבעל הרישום.

עדכונים בעלון לרופא:

קו תחתון- התווסף מידע, קו חוצה- מידע שנמחק

פרק 4- CLINICAL PARTICULARS**4.5 Interaction with other medicinal products and other forms of interaction**

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Effect of dabrafenib on other medicinal products

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The transport protein Pgp may also be induced as well as other transporters, e.g. MRP-2, ~~BCRP and OATP1B1/1B3~~. Induction of OATP1B1/1B3 and BCRP is not likely based on the observations from a clinical study with rosuvastatin.

In vitro, dabrafenib produced dose-dependent increases in CYP2B6 and CYP3A4. In a clinical drug interaction study, C_{max} and AUC of oral midazolam (a CYP3A4 substrate) decreased by ~~6147%~~ and ~~7465%~~, respectively with co-administration of repeat-dose dabrafenib ~~using a formulation with lower bioavailability than dabrafenib formulation.~~

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Onset of induction is likely to occur after 3 days of repeat dosing with dabrafenib. Upon discontinuation of dabrafenib offset of induction is gradual, concentrations of sensitive CYP3A4, CYP2B6, CYP2C8, CYP2C9 and CYP2C19, UDP glucuronosyl transferase (UGT) and transporter substrates (e.g. Pgp or MRP-2) may increase and patients should be monitored for toxicity and dosage of these agents may need to be adjusted.

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Effects of dabrafenib on substance transport systems

Dabrafenib is an *in vitro* inhibitor of human organic anion transporting polypeptide (OATP) 1B1 (OATP1B1), ~~and OATP1B3 and BCRP~~. ~~Following co-administration of a single dose of rosuvastatin (OATP1B1, OATP1B3 and BCRP substrate) with repeat-dose dabrafenib 150 mg twice daily in 16 patients, C_{max} of rosuvastatin increased 2.6-fold whereas the AUC was only minimally changed (7% increase). The increased C_{max} of rosuvastatin is unlikely to have clinical relevance and clinical relevance can not be excluded. Therefore caution is recommended at co-administration of dabrafenib and OATP1B1 or OATP1B3 substrates such as statins.~~

פרק 5- :PHARMACOLOGICAL PROPERTIES

5.2 Pharmacokinetic properties

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Biotransformation

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Neither dabrafenib nor its 3 main metabolites were demonstrated to be inhibitors of Pgp *in vitro*. ~~Dabrafenib and desmethyl-dabrafenib were also shown to be moderate inhibitors of human breast cancer resistance protein (BCRP); however, based on clinical exposure, the risk of a drug-drug interaction is minimal.~~

עדכונים בעלון לצרכן:

פרק 3 - כיצד תשתמש בתרופה? :

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במקרה של הקאה לאחר נטילת התרופה, אין לקחת מנה נוספת. קח את המנה הבאה שלך במועד הרגיל.

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העלונים לרופא ולצרכן כוללים שינויי עריכה / שינויים נוספים שאינם החמרות.

בברכה,

ילנה גיטלין
רוקחת ממונה