

Pemigatinib + PPI's	M 8429
----------------------------	---------------

Onderbouwend	Stof	Effect	Code
Ji T. Eur J Clin Pharmacol 2021;77:1887-97. + Correctie: Eur J Clin Pharmacol 2021;77:1899.	pemigatinib + esomeprazol	↓Cmax pemigatinib met 35% en AUC met 8% door esomeprazol. Regime: pemigatinib 13.5 mg 1x op dag 1 op lege maag, esomeprazol 40 mg/dag met voedsel op dag 3- 7; vervolgens pemigatinib + esomeprazol 1x met voedsel op dag 8; studie met 17 vrijwilligers. Auteurs: although the effects of esomeprazole on pemigatinib PK were statistically significant, they were not deemed to be clinically relevant. Pemigatinib can be administered without regard to coadministration of PPIs.	3A
SPC + EPAR Pemazyre	pemigatinib + esomeprazol	getallen & regime uit Ji 2021.	2A
Ji T. Clin Pharmacol Drug Dev 2022;11:454-66.	pemigatinib + PPI	pharmacokinetics analysis (318 patients, of which 87 (27%) used a PPI and 36 (11%) a H2-antagonist): PPI coadministration increases typical pemigatinib apparent Vc/F by 24.4%. Overall, the impact of age, body weight, race/ ethnicity (Hispanic, Japanese), creatinine clearance, clinical laboratory values (albumin, total bilirubin, AST, ALT, and alkaline phosphatase), concomitant medication (weak/moderate CYP3A4 inhibitors, diuretics, <u>PPI</u> , and <u>H2-receptor antagonist</u>), renal and hepatic impairment (mild, moderate), tumor type (cholangiocarcinoma), and <i>FGFR2</i> rearrangement or fusion on pemigatinib clearance were not statistically significant.	2A

Overig	Stof	Effect
SPC + EPAR Pemazyre	pemigatinib + PPI	'klinisch niet belangrijke verandering in blootstelling door esomeprazol. Echter, bij meer dan een derde van de patiënten die PPI's kregen, werd een aanzienlijke afname van de blootstelling waargenomen. PPI's moeten worden vermeden. EPAR p.65: An ad-hoc efficacy analysis from study FIGHT-302 (Annex II condition) on patients with PPIs versus without will be performed, to assess if there is any impact on survival due to reduced bioavailability of pemigatinib secondary to increased stomach pH due to PPI use, once data is available. In this study, pharmacokinetic samples will be obtained for participants randomised to the pemigatinib treatment group. Until further data is available, concomitant use of PPI should be avoided.

Opmerkingen

Werkgroep Interacties Oncologische middelen: actie Nee.

GIC: volgens SPC "klinisch niet relevant", maar SPC ontraadt vervolgens PPI's. SPC rept niet over pH-effect.

Stockley, PubMed: niets.

Risicofactoren	
Mitigerende factoren	

	Interactie	Actie	Datum
Beslissing WG OncolA	Ja	Nee	2 oktober 2024