# IMACO® (IMATINIB)

### **Indications:**

- ☐ Acute Lymphoblastic Leukemia Indicated for adults with relapsed or refractory Philadelphia chromosome positive (Ph+) acute lymphoblastic leukemia (ALL)
- $\hfill \square$  Myelodysplastic/Myeloproliferative Diseases

Indicated in adults with myelodysplastic/ myeloproliferative diseases -as sociated with platelet-derived growth factor receptor gene re-arrangements as determined with an FDA-approved test

☐ ypereosinophilic Syndrome/Eosinophilic Leukemia

Indicated for adults with hypereo sinophilic syndrome and/or chronic eosinophilic leukemia who have the FIP1L1-PDGFR-alpha fusion kinase

(mutational analysis or FISH demon stration of CHIC2 allele deletion) and for patients with HES and/or CEL who are FIP1L1-PDGFR-alpha fusion -ki nase negative or unknown

- ☐ Chronic Myeloid Leukemia
- ☐ Dermatofibrosarcoma Protuberans Indicated for adults with unresectable, recurrent and/or metastatic dermatofibrosarcoma protuberans
- ☐ Mastocytosis
- ☐ Gastrointestinal Stromal Tumors Pharmacological Category: Antineoplastics, Tyrosine Kinase In

hibitor

# Pregnancy:

Manufacturer advises avoid unless potential benefit outweighs risk, effective contraception required during treatment

## Lactation:

Discontinue breast-feeding

### Side effects:

Common adverse effects are as fol low:

- ☐ Cardiovascular: Edema includes aggravated edema, anasarca, asci tes, pericardial effusion, peripheral edema, pulmonary edema, and su perficial edema), facial edema, chest pain, hypotension
- ☐ Central nervous system: Fatigue, pain, headache, dizziness, insomnia, depression, taste disorder, rigors, anxiety, paresthesia, chills
- ☐ Dermatologic: Skin rash, dermatitis, pruritus, night sweats, alopecia, diaphoresis
- ☐ Endocrine & metabolic: Increased lactate dehydrogenase, weight gain, decreased serum albumin, hypoka lemia
- ☐ Gastrointestinal: Nausea, diarrhea,

vomiting, abdominal pain, anorexia, dyspepsia, flatulence, abdominal distension, constipation, stomatitis ☐ Hematologic & oncologic: Hemorrhage, leukopenia, hypoproteinemia, anemia, neutropenia, thrombocytope-☐ Hepatic: Increased serum AST, increased serum ALT, increased alka line phosphatase, increased serum bilirubin, increased serum transami nases ☐ Infection: Influenza □ Neuromuscular & skeletal: Muscle cramps, musculoskeletal pain, arthralgia, myalgia, weakness, back pain, limb pain, ostealgia ☐ Ophthalmic: Periorbital edema, increased lacrimation, eyelid edema, blurred vision ☐ Renal: Increased serum creatinine Respiratory: Nasopharyngitis, cough, upper respiratory tract in fection, dyspnea, pharyngolarynge al pain, rhinitis, pharyngitis, flu-like symptoms, pneumonia, sinusitis ☐ Miscellaneous: Fever Contraindications: Hypersensitivity to imatinib or any component of the formulation

# Interactions:

Cobimetinib, conivaptan, dihydro ergotamine, eliglustat, flibanserin, ivabradine, lomitapide, lurasidone, naloxegol, regorafenib, venetoclax, ado-trastuzumab emtansine, avana fil, axitinib, bedaquiline, bosutinib, brigatinib, cabazitaxel, cabozantinib, ceritinib, dabrafenib, daclatasvir, fen tanyl, hydrocodone, ibrutinib, idelalisib, ivacaftor, macitentan, midostaurin,

neratinib, olaparib, osimertinib, oxycodone, palbociclib, pimavanserin, po malidomide, ponatinib, quinidine, ribociclib, riociguat, ruxolitinib, sonidegib, suvorexant, tamsulosin, thioridazine, tofacitinib, trabectedin, vemurafenib, vilazodone, vorapaxar, warfarin

### Dose:

Adult:

- ☐ Acute Lymphoblastic Leukemia 600 mg PO once daily
- ☐ Myelodysplastic/Myeloproliferative Diseases

400 mg PO once daily

☐ Hypereosinophilic Syndrome/Eosinophilic Leukemia

400 mg PO once daily

In patients with demonstrated F1P1L1-PDGFR-alpha fusion kinase: 100 mg PO once daily; may increase to 400 mg once daily in the absence of adverse drug reactions if assess ments demonstrate an insufficient response to therapy

- ☐ Chronic Myeloid Leukemia Chronic phase
- Newly diagnosed adult and pediat ric patients with Philadelphia chromosome positive (Ph+) chronic myeloid leukemia (CML) in chronic phase
- 400 mg PO once daily
- Chronic phase after failure of inter feron-alpha therapy: May increase to 600 mg/day in the absence of severe adverse drug reaction and severe non-leukemia related neutropenia or thrombocytopenia in the following cir cumstances: disease progression (at any time), failure to achieve a satis factory hematologic response after at least 3 months of treatment, failure to

achieve a cytogenetic response after 6-12 months of treatment, or loss of a previously achieved hematologic or cytogenetic response

Accelerated phase or blast crisis

- 600 mg PO once daily
- May increase to 400 mg PO q12hr in the absence of severe adverse drug reaction and severe non-leukemia related neutropenia or thrombocyto penia in the following circumstances: disease progression (at any time), fail ure to achieve a satisfactory hematologic response after at least 3 months of treatment, failure to achieve a cy togenetic response after 6-12 months of treatment, or loss of a previously achieved hematologic or cytogenetic response
- ☐ Dermatofibrosarcoma Protuberans 400 mg PO q12hr
- ☐ Mastocytosis

Indicated for adults with aggressive systemic mastocytosis without the D816V c-Kit mutation as determined with an FDA-approved test or with c-Kit mutational status unknown Without D816V c-Kit mutation: 100 mg PO once daily

c-Kit mutational status unknown: 400 mg PO once daily if not responding to other therapies

ASM associated with eosinophilia (a clonal hematological disease related to the fusion kinase FIP1L1-PDG FR-alpha): 100 mg PO once daily initially, may increase to 400 mg/day in absence of adverse effects if-re sponse to therapy is insufficient

☐ Gastrointestinal Stromal Tumors Unresectable and/or metastatic ma lignant GIST • 400 mg PO once daily; may increase to 400 mg q12hr in patients showing clear signs or symptoms of disease progression at a lower dose and in the absence of severe adverse drug reactions

Adjuvant treatment following complete gross resection of GIST

• 400 mg PO once daily x3 years

# Pediatric:

- ☐ Chronic Myeloid Leukemia Indicated for newly diagnosed adult and pediatric patients with Philadelphia chromosome positive (Ph+) chronic myeloid leukemia (CML) in chronic phase
- <1 year: Safety and efficacy not established
- ≥1 year: 340 mg/m²/day PO; not to exceed 600 mg/day
- ☐ Acute Lymphoblastic Leukemia Indicated for treatment of newly diagnosed children with Philadelphia chromosome positive (Ph+) acute lymphoblastic leukemia (ALL)
- <1 year: Safety and efficacy not established
- ≥1 year: 340 mg/m²/day PO; not to exceed 600 mg/day

Administration:

- $\hfill\Box$  Take with meal and large glass of water.
- ☐ Imatinib is associated with a moderate emetic potential; antiemetics may be recommended to prevent nausea and vomiting.
- $\hfill \Box$  Avoid grapefruit juice.

Dosage Forms:

100 & 400 mg oral capsules

# References:

- 1) British National Formulary 68, September 2014- March 2015, pages 603-604
- 2) Lexicomp,s Drug Reference Handbooks, American Pharmacists Association, 20th edition, pages 884-887
- 3)https://www.drugs.com/ppa/imatinib.html
- 4)http://www.pdr.net/drug-summary/ Gleevec-imatinib-mesylate-433
- 5)http://reference.medscape.com/ drug/gleevec-imatinib-342239

