Ixazomib

Care Team Contact Information: _____

Pharmacy Contact Information: _____

Diagnosis: _____

- This treatment is used for multiple myeloma (MM).
- It may also be used for other reasons.

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
Ixazomib (ik-SA-zoh-mib): Ninlaro (nin-LAR-oh)	Blocks a part of the cell called the proteasome, which helps many proteins break down. This stops cancer cells from growing and makes them die.	Capsule taken by mouth.

Treatment Administration and Schedule

Treatment is typically repeated every 28 days. This length of time is called a "cycle." Ixazomib is often given in combination with other treatments. Talk with your care team about your exact treatment and schedule.

Your ixazomib dosing instructions:

_____

_____

_____

- Ixazomib comes in 3 capsule strengths: 2.3 mg, 3 mg, and 4 mg.
- Your dose might differ, but ixazomib is typically taken as one 4 mg capsule by mouth once a week on Days 1, 8, and 15 of a 28-day treatment cycle.
- Take ixazomib 1 time each week, on the same day each week for the first 3 weeks of each cycle.
- Take ixazomib at least 1 hour before or at least 2 hours after food.
- Swallow ixazomib capsules whole with water. Do not crush, chew, or open the capsule.
- Do not change your dose or stop taking ixazomib unless your care team tells you to.
- Your care team may tell you to change your dose, temporarily stop, or completely stop taking ixazomib if you develop certain side effects.

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Treatment Administration and Schedule Continued

- If you miss a dose of ixazomib, or if you are late taking a dose, take the dose as long as the next scheduled dose is more than 3 days (72 hours) away. Do not take a missed dose of ixazomib if it is within 3 days (72 hours) of your next scheduled dose.
- If you vomit after taking a dose of ixazomib, do not repeat the dose. Take your next dose of ixazomib on the next scheduled day and time.
- Taking too much ixazomib (overdose) can cause serious side effects, including death. If you take too much ixazomib, call your care team or go to the nearest hospital emergency room right away. Take your medicine pack with you.

Treatment Name	Cycle 1								Next Cycle
	Day 1	Day 2	…	Day 8	…	Day 15	…	Day 28	Day 1
Ixazomib	✓			✓		✓			✓

Storage and Handling of Ixazomib

- Store ixazomib at room temperature between 68ºF and 77ºF (20ºC and 25ºC). Do not store above 86°F (30°C).
- Do not freeze ixazomib.
- Store ixazomib capsules in the original packaging until just before each use.
- If someone else is giving you your medication, they should wear gloves or pour the pills directly from the bottle into the cap, a small cup, or your hand without touching them. They should wash their hands before and after handling the pills.
- Avoid direct contact with the capsule contents. If you accidentally get powder from the ixazomib capsule on your skin, wash the area well with soap and water. If you accidentally get powder from the ixazomib capsule in your eyes, flush your eyes well with water.
- Keep ixazomib and all medicines out of the reach of children and pets.
- Ask your care team how to safely throw away any unused ixazomib.

Appointments

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

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Supportive Care to Prevent and Treat Side Effects

Description	Supportive Care Taken at Home
To help prevent or treat nausea and vomiting	
To help prevent and treat diarrhea	
Other	

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Common Side Effects

Side Effect	Important Information
Low White Blood Cell (WBC) Count (Neutropenia) and Increased Risk of Infection	Description: WBCs help protect your body from infections. A low WBC count increases your risk of infection. Recommendations: • Wash your hands often and bathe regularly. • Avoid crowded places and close contact with people who are sick. • Follow food safety and wound care advice from your care team. • Your care team may prescribe medicine to help your WBCs recover. Talk to your care team if you have: • Fever of 100.4°F (38°C) or higher • Chills • New or worsening cough or sore throat • Painful urination or signs of a urinary infection • Feeling much more tired than usual • Red, swollen, warm, or painful areas on the skin (possible skin infection)
Low Platelet Count (Thrombocytopenia)	Description: Platelets help your blood clot and wounds heal. A low platelet count increases your risk of bruising and bleeding. Recommendations: • Blow your nose gently and avoid picking it. • Brush your teeth gently with a soft toothbrush and keep good oral hygiene. • Use an electric razor for shaving and a nail file instead of nail clippers. • Avoid over-the-counter medicines that can increase bleeding risk (for example, nonsteroidal anti-inflammatory drugs (NSAIDs) like ibuprofen). • Talk with your care team or dentist before medical or dental procedures — you may need to pause treatment. Talk to your care team if you have: • A nosebleed lasting more than 5 minutes despite pressure • A cut that continues to bleed • Heavy gum bleeding when brushing or flossing • Sudden or severe headache • Blood in your urine or stool • Blood in your spit after coughing

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<table>
<tr><td>Nausea and Vomiting</td><td>Description: Nausea is an uncomfortable feeling in your stomach or the need to throw up. You may or may not vomit.

Recommendations:
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 sips of water, broth, or other clear liquids. If these stay down, try soft foods (such as gelatin, plain cornstarch pudding, yogurt, strained soup, or strained cooked cereal) and gradually return to solid foods.
Your care team may prescribe medicine for these symptoms.
Talk to your care team if you have:
Vomiting for more than 24 hours
Nonstop vomiting
Signs of dehydration (very thirsty, dry mouth, dizziness, or dark urine)
Blood in your vomit or vomit that looks like coffee grounds
Severe stomach pain that does not go away after vomiting</td></tr>
<tr><td>Diarrhea</td><td>Description: Diarrhea is loose, watery stools or more frequent bowel movements than usual. It can cause dehydration and weakness.

Recommendations:
Keep track of how often you go to the bathroom each day.
Drink 8 to 10 glasses of water or other fluids daily, unless your care team tells you otherwise.
Eat small meals of mild, low-fiber foods (such as bananas, applesauce, potatoes, chicken, rice, and toast).
If you have diarrhea, avoid high-fiber foods (such as raw vegetables, fruits, and whole grains), gas-producing foods (such as broccoli and beans), dairy (such as milk and yogurt), and spicy, fried, or greasy foods.
Your care team may recommend an antidiarrheal medicine such as loperamide (Imodium).
Talk to your care team if you have:
4 or more bowel movements above your usual number in 24 hours
Dizziness or lightheadedness while having diarrhea
Signs of dehydration (very thirsty, dry mouth, dizziness, or dark urine)
Bloody diarrhea</td></tr>
</table>

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Constipation	Description: Constipation means hard, dry stools or fewer bowel movements than normal. It can cause discomfort or pain. Recommendations: • Track how often you have bowel movements each day. • Drink 8 to 10 glasses of fluids daily, unless your care team says otherwise. • Stay active and exercise regularly. • Eat more high-fiber foods (such as raw fruits, vegetables, and whole grains) unless advised otherwise. • Your care team may recommend laxatives such as polyethylene glycol (MiraLAX) or senna. Talk to your care team if you have: • Constipation lasting 3 or more days • No bowel movement 48 hours after using a laxative
Numbness, Tingling, or Burning in Your Hands or Feet (Peripheral Neuropathy)	Description: Nerve pain and tingling are uncomfortable sensations from nerve damage or irritation. Pain may be sharp, burning, or deep. Tingling can feel like pins-and-needles or mild electric shocks, often in the hands, feet, arms, or legs. Recommendations: • Keep a daily log of pain and sensations, noting triggers and what helps or makes it worse. • Check your feet every day for cuts, sores, blisters, or color changes, especially if numbness reduces feeling. • Wear comfortable, well-fitting shoes and avoid walking barefoot if sensation is reduced. • Protect hands and feet from extreme heat or cold. • Your care team may recommend or prescribe medicines, topical treatments, physical therapy, or supplements to help with symptoms. Talk to your care team if you have: • New or worsening “pins and needles”, burning, or numbness in your hands or feet • Trouble moving your arms or legs, or weakness • Problems with balance or frequent falls

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Select Rare Side Effects

Side Effect	Talk to Your Care Team if You Have Any of These Signs or Symptoms	
Thrombotic Microangiopathy (TMA)	TMA is a condition involving blood clots and injury to small blood vessels that may cause harm to your kidneys, brain, and other organs. Get medical help right away if you get any of the following signs or symptoms during treatment: • Confusion • Weakness • Swelling of arms and legs • Yellowing of your skin or the whites of your eyes (jaundice)	• Stomach-area (abdominal) or back pain • Nausea or vomiting • Feeling sick • Decreased urination
Swelling (Edema)	• Swelling in your face, arms, legs, ankles, or feet	• Weight gain from swelling
Liver Problems	• Yellowing of your skin or the white part of your eyes (jaundice) • Severe nausea or vomiting	• Pain on the right side of your stomach area (abdomen) • Dark, tea-colored urine • Bleeding or bruising more easily than normal
Severe Skin Reactions	• A red, itchy, skin rash • Peeling of your skin or blisters	• Severe itching • Fever of 100.4°F (38°C) or higher
Herpes Zoster (Shingles and Chicken Pox Virus) Reactivation	• A painful, burning, or tingling rash • Blisters on one side of your body or face • Pain, itching, or sensitivity before a rash appears	• Fever or chills • Headache or feeling very tired • Eye pain, vision changes, or a rash near your eye

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.

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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 are able to become pregnant:
        - Your care team will verify your pregnancy status before treatment.
        - Use an effective method of birth control during treatment and for 90 days after your last dose of ixazomib.
        - If you think you might be pregnant or if you become pregnant, tell your care team right away.
    - If your partner is able to become pregnant, use an effective method of birth control—such as condoms—during treatment and for 90 days after your last dose of ixazomib.
- **Do not breastfeed** during treatment and for 90 days after your last dose of ixazomib.

Handling Body Fluids and Waste

Some drugs you receive may stay in your urine, stool, sweat, or vomit for many days after treatment. Because many cancer drugs are toxic, your body waste may also be dangerous to touch. To help protect yourself, your loved ones, and the environment, **follow these instructions** for at least **2 months** after each dose of **ixazomib**:

- People who are pregnant should avoid touching anything that may be soiled with body fluids from the patient.
- You can use your usual toilet. Always close the lid and flush to discard all waste. If you have a low-flow toilet, flush twice.
- If the toilet or seat is soiled with urine, stool, or vomit, clean the surface after each use before others use it.
- Wash your hands with soap and water for at least 20 seconds after using the toilet.
- If you need a bedpan, inform your caregiver so they can wear gloves and assist with cleanup. Wash the bedpan with soap and water daily.
- If you cannot control your bladder or bowels, use a disposable pad with a plastic back, a diaper, or a sheet to absorb waste.
- Wash any skin exposed to body waste with soap and water.
- Wash soiled linens or clothing separately from other laundry. If you don't have a washer, place them in a plastic bag until they can be washed.
- Wash your hands with soap and water after touching soiled linens or clothing.

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.
- **This Patient Education Sheet may not describe all possible side effects.**
  Call your care team for medical advice about side effects. You may report side effects to the FDA at 1-800-FDA-1088.

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Notes

Updated Date: November 2, 2026

Scan the QR code below to access this education sheet.

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The Association of Cancer Care Centers (ACCC), Hematology/Oncology Pharmacy Association (HOPA), Network for Collaborative Oncology Development & Advancement, Inc. (NCODA), and Oncology Nursing Society (ONS) have collaborated to gather information and develop this patient education guide. This guide is a summary of the medication, based on information provided by the drug manufacturer and other sources.

This guide does not cover all information available on the possible uses, directions, doses, precautions, warnings, interactions, adverse effects, or risks associated with this medication. It should not be used as a substitute for the advice of a qualified healthcare professional. The provision of this guide is for informational purposes only. It does not constitute or imply endorsement, recommendation, or favoring of this medication by ACCC, HOPA, NCODA, or ONS, who assume no liability for and cannot ensure the accuracy of the information presented. All decisions regarding this medication should be made with the guidance and direction of a qualified healthcare professional.

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