Pemigatinib

Care Team Contact Information: _____

Pharmacy Contact Information: _____

Diagnosis: _____

- This treatment is often used for:
  - A type of bile duct cancer called cholangiocarcinoma (CCA)
  - A type of blood cancer called myeloid/lymphoid neoplasm (MLN)
- It may also be used for other reasons.
- Your care team will perform a test for a certain type of abnormal FGFR gene to make sure pemigatinib 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
Pemigatinib (PEH-mih-GA-tih-nib): Pemazyre (PEH-muh-zeer)	Slows down or stops the growth of cancer cells by blocking a specific protein that helps them survive.	Tablet taken by mouth.

Treatment Administration and Schedule

Your pemigatinib dosing instructions:

_____

_____

_____

- Pemigatinib comes in 3 tablet strengths: 4.5 mg, 9 mg, and 13.5 mg.
- Your dose might differ, but pemigatinib is typically taken as:
  - One 13.5 mg tablet once daily for 14 days, followed by 7 days off treatment, to complete a 21-day treatment cycle for cholangiocarcinoma
  - One 13.5 mg tablet once daily for myeloid/lymphoid neoplasms
- Take pemigatinib at about the same time each day.
- Take pemigatinib with or without food.
- Swallow tablets whole. Do not crush, split, or dissolve pemigatinib tablets.
- Do not change your dose or stop taking pemigatinib unless your care team tells you to.

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Treatment Administration and Schedule (Continued)

- Your care team may tell you to change your dose, temporarily stop, or completely stop taking pemigatinib if you develop certain side effects.
- If you miss a dose of pemigatinib, you can take the missed dose within 4 hours on the same day. If more than 4 hours have passed, do not make up the dose. Take your regular dose of pemigatinib the next day at the usual time. Do not take more pemigatinib than prescribed to make up for the missed dose.
- If you vomit after taking a dose of pemigatinib, do not make up the dose. Take your next dose at your regularly scheduled time.
- If you take too much pemigatinib, call your care team or go to the nearest hospital emergency room right away.

☐ **Option #1: Dosing Schedule for Cholangiocarcinoma**

- Take pemigatinib 1 time each day for 14 days, followed by 7 days off treatment.

Treatment Name	Cycle 1															Next Cycle
	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7	Day 8	Day 9	Day 10	Day 11	Day 12	Day 13	Day 14	Days 15-21	Day 1
Pemigatinib	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Week-Long Break	✓

☐ **Option #2: Dosing Schedule for Myeloid/Lymphoid Neoplasms**

- Take pemigatinib 1 time each day.

Storage and Handling of Pemigatinib

- Store pemigatinib at room temperature between 68°F and 77°F (20°C and 25°C).
- People who are or may be pregnant should wear gloves when handling pemigatinib.
- Keep pemigatinib and all medicines out of the reach of children and pets.
- Ask your care team how to safely throw away any unused pemigatinib.

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 any appointments, call your care provider as soon as possible to reschedule your appointment.

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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 lower the risk of eye problems	
To help prevent hand-foot skin reaction (HFSR)	
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 getting infections. 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
Low Red Blood Cell (RBC) Count and Hemoglobin (Hgb) (Anemia)	Description: RBCs and Hgb carry oxygen to your body's tissues and remove carbon dioxide. Low RBC or Hgb (anemia) can make you feel weak, very tired, or look pale. Recommendations: • Aim for 7 to 8 hours of sleep each night. • Do not drive, operate heavy machinery, or do other dangerous activities if you are very tired. • Balance activity and rest — stay as active as you can, but rest when needed. • Eat a balanced diet and follow any nutrition or supplement advice from your care team. Talk to your care team if you have: • Shortness of breath • Dizziness or fainting • Fast or irregular heartbeats • Sudden or severe headache

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Fatigue	Description: Fatigue is a constant and sometimes strong feeling of tiredness. Recommendations: • Routine exercise can help reduce fatigue. Talk with your care team to find the right type and amount of activity for you. • Ask family and friends for help with daily tasks and for emotional support. • Try healthy ways to feel better, such as meditation, journaling, yoga, or guided imagery, to reduce anxiety and improve well-being. • Aim for 7 to 8 hours of sleep each night. Limit daytime naps to help you sleep better at night. • Do not drive, operate heavy machinery, or do other potentially dangerous activities if you are very tired. Talk to your care team if you have: • Tiredness that affects your daily life or prevents you from doing normal activities • Tiredness that does not get better with rest • Dizziness or weakness along with severe tiredness
Nausea and Vomiting	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 or coffee-ground-like appearance in your vomit • Severe stomach pain that does not go away after vomiting

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Mouth Problems	Description: Mouth problems can include changes in sense of taste, dry mouth, trouble swallowing, and mouth sores. Recommendations: • Rinse your mouth after meals and at bedtime; rinse more often if sores develop. • Brush your teeth gently with a soft toothbrush or use a cotton swab after meals. • Use a mild, non-alcohol mouth rinse at least 4 times daily (after meals and at bedtime). Example: 1/8 teaspoon salt + 1/4 teaspoon baking soda in 8 oz warm water. • Avoid acidic, hot, spicy, rough, or crunchy foods and drinks that can irritate your mouth. • Avoid tobacco, alcohol, and alcohol-based mouthwash. • Your care team may prescribe medicines or mouth treatments to help with pain and healing. Talk to your care team if: • Painful mouth sores or throat pain • Trouble eating or significant weight loss
Stomach-Area (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
Diarrhea	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 than normal in 24 hours • Dizziness or lightheadedness while having diarrhea • Signs of dehydration (very thirsty, dry mouth, dizziness, or dark urine) • Bloody diarrhea

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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
Low Appetite	Description: Loss of appetite can lead to weight loss and low energy. Small changes in when and what you eat can help maintain strength and nutrition. Recommendations: • Be as active as you can. Do light physical activity before a meal (check with your care team before starting an exercise program). • Note times of day when your appetite is best and eat your largest meal then. • Eat 5–6 small meals or snacks each day. • Choose high-protein foods (beans, chicken, fish, meat, yogurt, tofu, eggs). Eat protein first during meals. • Choose higher-calorie foods (avoid “low-fat,” “fat-free,” or “diet” options when trying to gain/maintain weight). • If you feel full quickly, avoid drinking 30 minutes before a meal and drink liquids between meals; choose calorie-containing drinks rather than diet drinks. • Have a bedtime snack that’s easy to digest (for example, peanut butter and crackers). If you have reflux, wait at least 1 hour before lying down. • Try nutritious beverages (high-protein shakes or smoothies) if solid food is unappealing. • Ask your care team about liquid nutrition supplements and ways to add protein or calories (protein powder, yogurt, ice cream). Talk to your care team if you have: • Unintentional weight loss • Little or no appetite for several days • Excessive tiredness or low energy

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Liver Problems	Description: Treatment can cause liver injury. Your care team may check your liver with blood tests before and during treatment. Talk to your care team if you have: • 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
Kidney Problems	Description: Treatment can cause kidney problems, including damage to the kidneys and decreased kidney function. Your care team will monitor your kidney function during treatment. Recommendations: • Drink 8 to 10 glasses of water or other fluids each day, unless your care team tells you otherwise. • Your care team may give you fluids and electrolytes with your treatment. Talk to your care team if you have: • Decrease in your amount of urine • Blood in your urine • Swelling of your ankles • Loss of appetite
Dry Eyes and Blurry Vision	Description: Eye problems such as dry eyes and blurry vision can occur. Dry eyes may cause a gritty sensation, burning, or redness. Blurred vision can make it difficult to focus. Your care team will monitor your eyes during treatment with pemigatinib and may send you to an eye specialist (ophthalmologist) if necessary. Recommendations: • Your care team may recommend using artificial tears. • Stay well hydrated. • Use a humidifier in dry environments. • Wear sunglasses outdoors. • Avoid smoke, strong odors, and allergens. Talk to your care team if you have: • Dry eyes • Increased tears • Blurred vision • Vision changes
High Blood Sugar (Hyperglycemia)	Description: An increase in blood sugar is common during treatment. Recommendations: • Eat a well-balanced diet. • Limit sugary drinks and foods. • Eat smaller, more frequent meals. • Be physically active for at least 30 minutes most days. • Your care team may ask you to check your blood sugar at home. If you are already doing this, they may ask you to do it more frequently. Talk to your care team if you have: • Frequent urination • Drowsiness • Increased thirst • Loss of appetite • Blurred vision • Fruity smell on your breath • Confusion • Nausea, vomiting, or stomach pain • It becomes harder to control your blood sugar

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Hair Loss (Alopecia)	Description: Hair loss or thinning may begin days to weeks after treatment starts and usually grows back later. New growth can be a different color or texture and may not look the same as before. Recommendations: • Consider a short haircut before treatment and use scarves, hats, or wigs for comfort and confidence. • Keep your head covered outdoors to protect it from the sun and cold; use sunscreen on your uncovered scalp. • Use gentle haircare: mild shampoo, soft brush, and avoid heat styling and harsh treatments. • Ask your care team about wig prescriptions or resources for head coverings. Talk to your care team if you have: • No hair regrowth months after treatment ends • Concern about hair changes or need help finding a wig or support resources
Nail Problems	Description: Nails may become more brittle, thinner, and could change color during treatment. Recommendations: • Keep your fingernails and toenails trimmed short. • Wear cotton gloves when working. When cleaning or washing dishes, use cotton-lined rubber gloves to keep your hands from becoming dry and irritated. Do not use unlined rubber gloves because they seal in sweat and irritate the skin. • Avoid manicures, pedicures and artificial nails, which may increase the risk of infection. • Do not bite your nails or pick at your cuticles. • Nail polish can help strengthen and may protect nails. To take off polish, use "oily" remover to prevent drying. • Soak your hands in natural oils (such as olive oil), to relieve dryness. • Wear loose-fitting shoes with cushioned cotton socks. Talk to your care team if you have: • Pain related to nail changes • Fingernails or toenails that separate from the nail bed

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Rash or Itchy Skin	Description: Rash or itchy skin can cause redness, swelling, and a variety of bumps or patches (small red spots, welts, blisters, or scaly dry areas). Recommendations: • Keep your skin moisturized with creams or lotions to reduce rash and itchiness. • Wear loose-fitting clothing. • Avoid perfumes and colognes, as they may worsen rash symptoms. • Limit time spent in the 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 ultraviolet (UV) protection and broad-brimmed hats. • Apply broad-spectrum sunscreen (UVA/UVB) with sun protective factor (SPF) 30 or higher as directed. • Use lip balm with SPF 30 or higher. • Avoid tanning beds. • Your care team may recommend medicines for symptoms. Talk to your care team if you have: • Rash or itching that continues to worsen
High Phosphate Levels in Your Blood (Hyperphosphatemia) and Buildup of Minerals in Different Tissues in Your Body	Description: Treatment may cause high levels of phosphate in your blood. This may lead to buildup of minerals, such as calcium, in different tissues in your body. Your care team will do blood tests to check you for these changes and will treat you if needed. Recommendations: • Read the Nutrition Facts on your food label. • Start a low-phosphate diet (limit dairy, cola, nuts, organ meats, processed foods). • Stay well hydrated. • Avoid phosphate-containing laxatives or supplements. • Your care team may prescribe changes in your diet or phosphate lowering therapy (such as sevelamer (Renvela) or calcium carbonate (Tums)). Talk to your care team if you have: • Muscle cramps, spasms, or numbness/tingling • Severe itching or new skin changes • Bone or joint pain • New or worsening irregular heartbeat, dizziness, or fainting • Little or no urine output

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Changes in Other Electrolytes and Other Laboratory Results	Description: Treatment may cause high levels of calcium and uric acid, and low levels of sodium, in your blood. Your care team will do blood tests to check you for these changes and will treat you if needed. Talk to your care team if you have: • New or worsening confusion, drowsiness, or trouble thinking • Severe headache or nausea/vomiting • Seizures or fainting • Sudden weakness, unsteadiness, or trouble walking • Difficulty breathing • Sudden, severe joint pain, redness, or swelling (possible gout) • Severe flank or abdominal pain, blood in the urine, or difficulty urinating (possible kidney stone) • Little or no urine output or sudden weight gain from fluid • Fever, chills, or signs of infection • New or worsening kidney test results • Increased thirst • Urinating often • Nausea • Vomiting • Bone pain • Muscle weakness • Confusion • Irregular heartbeats

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 are able to become 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 of pemigatinib.
  - 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 1 week after your last dose of pemigatinib.
- **Do NOT breastfeed** during treatment and for 1 week after your last dose of pemigatinib.

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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.
- **You should not drink grapefruit juice or eat grapefruit during treatment with pemigatinib.** Grapefruit may increase the amount of pemigatinib in your blood.
- **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.

Notes

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Scan the QR code below to access this education sheet.

Important notice: 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 in gathering information for and developing this patient education guide. This guide represents a brief summary of the medication derived from information provided by the drug manufacturer and other resources.

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