

Avutometinib and Defactinib

Care Team Contact Information: _____

Pharmacy Contact Information: _____

Diagnosis: _____

- This treatment is used for low-grade serous ovarian cancer (LGSOC).
- It may also be used for other reasons.
- Your care team will perform a test for an abnormal KRAS gene to make sure that treatment is right for you.

Goal of Treatment: _____

- Treatment may continue 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
Avutometinib and Defactinib (a-VUE-toe-ME-ti-nib... dee-FAK-ti-nib): Avmapi Fakzynja Co-Pack (ave-MAP-kee Fak-zin- jah koh-pak)	Slows cancer-cell growth by blocking proteins and growth signals that help cancer cells grow and survive.	Avutometinib: Capsules taken by mouth. Defactinib: Tablet taken by mouth.

Treatment Administration and Schedule

Treatment is typically repeated every 4 weeks. This length of time is called a “cycle.”

- Avutometinib is taken 2 times a **week** (on Day 1 and Day 4 of each week) for the first 3 weeks, followed by 1 week off.
- Defactinib is taken 2 times a **day** for the first 3 weeks, followed by 1 week off.

Treatment Name	Cycle 1, Day																						Next Cycle
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22-28	Day 1
Avutometinib	✓			✓				✓			✓				✓			✓				1 Week Off	✓
Defactinib Morning Dose	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓
Evening Dose	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓

Treatment Administration and Schedule (Continued)

Your avutometinib and defactinib dosing instructions:

- This co-pack contains 2 medications: avutometinib (AVMAPKI) and defactinib (FAKZYNJA).
 - Avutometinib comes in 1 capsule strength: 0.8 mg.
 - Defactinib comes in 1 tablet strength: 200 mg.
 - Your care team will tell you how many capsules or tablets to take. If needed, they may change your dose.
- Your dose might differ, but avutometinib and defactinib are typically taken as follows:
 - Avutometinib: 3.2 mg (four 0.8 mg capsules) taken by mouth 2 times a week (Day 1 and Day 4), for the first 3 weeks of each 4-week cycle.
 - Defactinib: 200 mg (one 200 mg tablet) taken by mouth 2 times a day at the same time each day for the first 3 weeks of each 4-week cycle.
- Take avutometinib and defactinib with food.
- **Avutometinib capsules:**
 - Take each dose at the same time.
 - Swallow the avutometinib capsules whole. Do not chew, break, or open the capsules.
 - If you miss a dose of avutometinib by more than 24 hours, skip the missed dose and take the next scheduled dose as prescribed by your care team. Do not take 2 doses at the same time to make up for a missed dose.
- **Defactinib tablets:**
 - Swallow the defactinib tablets whole. Do not chew, break, or crush the tablets.
 - If you take antacids, take defactinib tablets 2 hours before or 2 hours after taking the antacid.
 - If you miss a dose of defactinib by more than 6 hours, skip the missed dose and take the next scheduled dose as prescribed by your care team. Do not take 2 doses at the same time to make up for a missed dose.
- If you vomit after taking avutometinib or defactinib, do not take an additional dose. Take the next scheduled dose as prescribed by your care team.

Storage and Handling of Avutometinib and Defactinib

- Store avutometinib capsules and defactinib tablets in the refrigerator between 36°F and 46°F (2°C and 8°C) in the original bottles.
- The avutometinib capsules and defactinib tablets come in child-resistant bottles.
- Do not discard or remove the desiccant from the avutometinib bottle.
- Keep avutometinib, defactinib, and all medicines out of the reach of children and pets.
- Ask your care team how to safely throw away any unused avutometinib or defactinib.

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.

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 skin reactions (topical steroid and oral antibiotic)	
Other	

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. 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 or very tired, or may make you 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

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
Swelling of the Body (Edema)	Description: Swelling and fluid retention can occur in different areas of the body, like the legs or hands. You might notice areas feel puffy or tighter than usual. Recommendations: • Keep a daily log of swelling and note any changes in size or location. • Elevate swollen limbs when resting. • Limit salt intake. • Stay active with regular, gentle exercises. • Avoid prolonged periods of sitting or standing without movement. Talk to your care team if you have: • Swelling that suddenly worsens or spreads to other areas • Pain, redness, or warmth in the affected area • Shortness of breath or difficulty breathing • Persistent swelling that does not improve with home management • Unexpected weight gain Note: Your care team may ask you to contact them if your weight increases by a certain amount over a certain time period.

Mouth Sores or Irritation (Mucositis or Stomatitis)	Description: Treatment can irritate the lining of the mouth. In some cases, this can cause redness, sores, pain, and swelling. 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 you have: • Painful mouth sores or throat pain • Trouble eating or significant weight loss
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 in your vomit or vomit that looks like coffee grounds • Severe stomach pain that does not go away after vomiting
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

Liver Problems	Description: Treatment can cause liver injury. Your care team will 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
High Triglyceride Levels (Hypertriglyceridemia)	Description: Triglycerides are a type of fat found in your blood. High triglycerides usually do not cause symptoms, but very high levels may increase your risk for pancreatic or heart problems over time. Recommendations: • Adopt a diet low in saturated and trans fats, increase fiber intake, and engage in regular physical activity. • Maintain a healthy weight. • Get regular triglyceride tests and inform the care team of any significant changes. • Do not smoke and limit alcohol consumption. Talk to your care team if you have: • Symptoms of heart attack or stroke, such as sudden numbness, weakness, or chest 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 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

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
Muscle Problems	Description: Treatment may cause muscle problems that can be severe (rhabdomyolysis). It can increase the level of an enzyme in your blood called creatine phosphokinase (CPK) and can be a sign of muscle damage. Your care team will perform blood tests to check your levels of CPK before starting each treatment cycle and during treatment. Talk to your care team if you have: - Weakness or difficulty moving arms and legs - Muscle or bone aches or pain that does not go away - Dark, red-colored urine or decreased urine output
Severe Skin Reactions and Sun Sensitivity	Description: Skin reactions are common with treatment and can be severe or life-threatening. Treatment can also make your skin sensitive to the sun (photosensitivity) and the light from sunlamps and tanning beds. Recommendations: - Before and during treatment, your care team will give you medicines to apply to your face, scalp, neck, upper chest, and upper back, and antibiotic medicines to take by mouth to help prevent skin reactions. - Limit your time in the sun. - You may burn more easily and get a severe sunburn. - Apply daily sunscreen with a Sun Protection Factor (SPF) of 30 or greater and wear a hat and clothes that cover your skin to protect against sunburn. Talk to your care team if you have: - Skin rash or acne - Dry skin - Itching - Sunburn - Blisters on your skin - Redness or swelling of your face, hands, or soles of your feet - Blisters or sores in your mouth - Peeling of your skin - Skin infection

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; apply sunscreen to your exposed 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
Eye Problems	Description: Eye problems are common with treatment and can be severe. Recommendations: - Your care team will send you to see an eye care professional before starting treatment, during treatment, and for any new or worsening eye problems. Talk to your care team if you have: - Changes in vision, such as blurred vision, double vision, or vision loss - Dry eye(s) - Eye and eyelid inflammation, including redness, swelling, and itching - Eye pain - New or increased floaters (small dark spots or squiggly lines that float across your vision) - Sensitivity to light or seeing flashes of light

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, Fertility, 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 can affect your **ability to have children**. It may damage your reproductive organs or stop them from working. If you are worried about fertility, talk to your care team before starting treatment.
- 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 1 month after your last dose of avutometinib and defactinib.
 - 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 4 months after your last dose of avutometinib and defactinib.
- **Do not breastfeed** during treatment and for 2 weeks after your last dose of avutometinib and defactinib.

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.
 - Especially tell your care team if you take:
 - proton pump inhibitors (PPIs) or H2 receptor antagonists
 - a blood thinner called warfarin
- **You should not drink grapefruit juice or eat grapefruit during treatment.** It may increase levels of defactinib and its active metabolite in your body.
- **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

Updated Date: July 15, 2026

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 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.

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