

# Relacorilant and Albumin-Bound Paclitaxel (Nab-Paclitaxel)

**Care Team Contact Information:** \_\_\_\_\_

**Pharmacy Contact Information:** \_\_\_\_\_

**Diagnosis:** \_\_\_\_\_

- This treatment is often used for ovarian, fallopian tube, or primary peritoneal cancer.
- 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
Relacorilant (reh-lay-KOR-ih-lant): Lifyorli (lif-YOR-lee)	Helps your chemotherapy work better. It blocks cortisol activity in cancer and immune cells, which can make chemotherapy more effective and may help your immune system fight the cancer.	Capsules taken by mouth.
Albumin-bound paclitaxel (al-BYOO-min bownd PA-klih-TAK-sil): Abraxane (uh-BRAK-sayn) This is also called “nab-paclitaxel”.	Stops cancer cells from dividing, which helps prevent their growth and causes them to die.	Infusion into a vein (intravenous (IV) infusion).

**Treatment Administration and Schedule:** Treatment is typically repeated every 4 weeks. This length of time is called a “cycle”.

- Relacorilant is taken by mouth on the day before, the day of, and the day after each albumin-bound paclitaxel infusion.
- Albumin-bound paclitaxel is given on Days 1, 8, and 15.

Treatment Name	Day Before Cycle 1 Starts	Cycle 1												Next Cycle
		Day 1	Day 2	...	Day 7	Day 8	Day 9	...	Day 14	Day 15	Day 16	...	Day 28	Day 1
<b>Treatment Given at the Clinic or Hospital</b>														
Albumin-bound paclitaxel		✓				✓				✓				✓
<b>Treatment Taken at Home</b>														
Relacorilant	✓	✓	✓		✓	✓	✓		✓	✓	✓		✓	✓

## Treatment Administration and Schedule (Continued)

Your relacorilant dosing instructions:

---

---

---

- Relacorilant comes in 2 capsule strengths: 25 mg and 100 mg. Your care team will tell you which capsules to take.
- Your dose may differ, but relacorilant is typically taken as one 100 mg capsule and two 25 mg capsules (150 mg total dose) on the day before, the day of, and the day after each nab-paclitaxel infusion.
- Take relacorilant 1 time on the day before, the day of, and the day after each nab-paclitaxel infusion.
- Take relacorilant with food.
- Swallow relacorilant capsules whole. Do not crush, chew, dissolve, or split the capsules.
- Do not change your dose or stop taking relacorilant unless your care team tells you to.
- Your care team may tell you to change your dose, temporarily stop, or completely stop taking if you develop certain side effects.
- If you miss a dose of relacorilant by less than 12 hours, take it as soon as you remember. If you miss a dose by more than 12 hours, skip the missed dose and take the next dose at your regular time. Do not take 2 doses at the same time to make up for a missed dose.
- If you vomit after taking relacorilant, do not take an extra dose.
- If you take too much relacorilant, call your care team or go to the nearest hospital emergency room right away.

## Storage and Handling of Relacorilant

- Store relacorilant at room temperature between 68°F and 77°F (20°C and 25°C).
- Store relacorilant in the original carton.
- Keep relacorilant and all medicines out of the reach of children and pets.
- Ask your care team how to safely throw away any unused relacorilant.

**Appointments:** Appointments may include regular check-ups with your care team, treatment appointments, 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.

### Supportive Care to Prevent and Treat Side Effects

Description	Supportive Care Given at the Clinic or Hospital	Supportive Care Taken at Home
To help prevent or treat nausea and vomiting	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>
Other	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>

## Common Side Effects

Side Effect	Important Information
<b>Low White Blood Cell (WBC) Count (Neutropenia) and Increased Risk of Infection (Boxed Warning)</b>	<p>Description: WBCs help protect your body from infections. A low WBC count increases your risk of getting infections.</p> <p>Recommendations:</p> <ul style="list-style-type: none"> <li>Wash your hands often and bathe regularly.</li> <li>Avoid crowded places and close contact with people who are sick.</li> <li>Follow food safety and wound-care advice from your care team.</li> <li>Your care team may prescribe medicine to help your WBCs recover.</li> </ul> <p>Talk to your care team if you have:</p> <ul style="list-style-type: none"> <li>Fever of 100.4°F (38°C) or higher</li> <li>Chills</li> <li>New or worsening cough or sore throat</li> <li>Painful urination or signs of a urinary infection</li> <li>Feeling much more tired than usual</li> <li>Red, swollen, warm, or painful areas on the skin (possible skin infection)</li> </ul>
<b>Low Platelet Count (Thrombocytopenia)</b>	<p>Description: Platelets help your blood clot and wounds heal. A low platelet count increases your risk of bruising and bleeding.</p> <p>Recommendations:</p> <ul style="list-style-type: none"> <li>Blow your nose gently and avoid picking it.</li> <li>Brush your teeth gently with a soft toothbrush and keep good oral hygiene.</li> <li>Use an electric razor for shaving and a nail file instead of nail clippers.</li> <li>Avoid over-the-counter medicines that can increase bleeding risk (for example, nonsteroidal anti-inflammatory drugs (NSAIDs) like ibuprofen).</li> <li>Talk with your care team or dentist before medical or dental procedures — you may need to pause treatment.</li> </ul> <p>Talk to your care team if you have:</p> <ul style="list-style-type: none"> <li>A nosebleed lasting more than 5 minutes despite pressure</li> <li>A cut that continues to bleed</li> <li>Heavy gum bleeding when brushing or flossing</li> <li>Sudden or severe headache</li> <li>Blood in your urine or stool</li> <li>Blood in your spit after coughing</li> </ul>
<b>Low Red Blood Cell (RBC) Count and Hemoglobin (Hgb) (Anemia)</b>	<p>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.</p> <p>Recommendations:</p> <ul style="list-style-type: none"> <li>Aim for 7 to 8 hours of sleep each night.</li> <li>Do not drive, operate heavy machinery, or do other dangerous activities if you are very tired.</li> <li>Balance activity and rest — stay as active as you can, but rest when needed.</li> <li>Eat a balanced diet and follow any nutrition or supplement advice from your care team.</li> </ul> <p>Talk to your care team if you have:</p> <ul style="list-style-type: none"> <li>Shortness of breath</li> <li>Dizziness or fainting</li> <li>Fast or irregular heartbeats</li> <li>Sudden or severe headache</li> </ul>

<p>Fatigue</p>	<p>Description: Fatigue is a constant and sometimes strong feeling of tiredness.</p> <p>Recommendations:</p> <ul style="list-style-type: none"> <li>• Routine exercise can help reduce fatigue. Talk with your care team to find the right type and amount of activity for you.</li> <li>• Ask family and friends for help with daily tasks and for emotional support.</li> <li>• Try healthy ways to feel better, such as meditation, journaling, yoga, or guided imagery, to reduce anxiety and improve well-being.</li> <li>• Aim for 7 to 8 hours of sleep each night. Limit daytime naps to help you sleep better at night.</li> <li>• Do not drive, operate heavy machinery, or do other potentially dangerous activities if you are very tired.</li> </ul> <p>Talk to your care team if you have:</p> <ul style="list-style-type: none"> <li>• Tiredness that affects your daily life or prevents you from doing normal activities</li> <li>• Tiredness that does not get better with rest</li> <li>• Dizziness or weakness along with severe tiredness</li> </ul>
<p>Nausea and Vomiting</p>	<p>Description: Nausea is an uncomfortable feeling in your stomach or the need to throw up. You may or may not vomit.</p> <p>Recommendations:</p> <ul style="list-style-type: none"> <li>• Eat smaller, more frequent meals.</li> <li>• Avoid fatty, fried, spicy, or highly sweet foods.</li> <li>• Eat bland foods at room temperature and drink clear liquids.</li> <li>• 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.</li> <li>• Your care team may prescribe medicine for these symptoms.</li> </ul> <p>Talk to your care team if you have:</p> <ul style="list-style-type: none"> <li>• Vomiting for more than 24 hours</li> <li>• Nonstop vomiting</li> <li>• Signs of dehydration (very thirsty, dry mouth, dizziness, or dark urine)</li> <li>• Blood or coffee-ground-like appearance in your vomit</li> <li>• Severe stomach pain that does not go away after vomiting</li> </ul>
<p>Diarrhea</p>	<p>Description: Diarrhea is loose, watery stools or more frequent bowel movements than usual. It can cause dehydration and weakness.</p> <p>Recommendations:</p> <ul style="list-style-type: none"> <li>• Keep track of how often you go to the bathroom each day.</li> <li>• Drink 8 to 10 glasses of water or other fluids daily, unless your care team tells you otherwise.</li> <li>• Eat small meals of mild, low-fiber foods (such as bananas, applesauce, potatoes, chicken, rice, toast).</li> <li>• 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.</li> <li>• Your care team may recommend an antidiarrheal medicine such as loperamide (Imodium).</li> </ul> <p>Talk to your care team if you have:</p> <ul style="list-style-type: none"> <li>• 4 or more bowel movements than normal in 24 hours</li> <li>• Dizziness or lightheadedness while having diarrhea</li> <li>• Signs of dehydration (very thirsty, dry mouth, dizziness, or dark urine)</li> <li>• Bloody diarrhea</li> </ul>

<p>Rash or Itchy Skin</p>	<p>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).</p> <p>Recommendations:</p> <ul style="list-style-type: none"> <li>• Keep your skin moisturized with creams or lotions to reduce rash and itchiness.</li> <li>• Wear loose-fitting clothing.</li> <li>• Avoid perfumes and colognes, as they may worsen rash symptoms.</li> <li>• Limit time spent in the heat to prevent worsening symptoms.</li> <li>• Avoid sun exposure, especially between 10 AM and 4 PM, to lower the risk of sunburn.</li> <li>• Wear long-sleeved clothing with ultraviolet (UV) protection and broad-brimmed hats.</li> <li>• Apply broad-spectrum sunscreen (UVA/UVB) with sun protective factor (SPF) 30 or higher as directed.</li> <li>• Use lip balm with SPF 30 or higher.</li> <li>• Avoid tanning beds.</li> <li>• Your care team may recommend medicines for symptoms.</li> </ul> <p>Talk to your care team if you have:</p> <ul style="list-style-type: none"> <li>• Rash or itching that continues to worsen</li> </ul>
<p>Hair Loss (Alopecia)</p>	<p>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.</p> <p>Recommendations:</p> <ul style="list-style-type: none"> <li>• Consider a short haircut before treatment and use scarves, hats, or wigs for comfort and confidence.</li> <li>• Keep your head covered outdoors to protect it from the sun and cold; use sunscreen on your uncovered scalp.</li> <li>• Use gentle haircare: mild shampoo, soft brush, and avoid heat styling and harsh treatments.</li> <li>• Ask your care team about wig prescriptions or resources for head coverings.</li> </ul> <p>Talk to your care team if you have:</p> <ul style="list-style-type: none"> <li>• No hair regrowth months after treatment ends</li> <li>• Concern about hair changes or need help finding a wig or support resources</li> </ul>

## Select Rare Side Effects

Side Effect	Talk to Your Care Team if You Have Any of These Signs or Symptoms	
Heart Problems	<ul style="list-style-type: none"> <li>• Swelling of your stomach area (abdomen), legs, hands, feet, or ankles</li> <li>• Shortness of breath</li> <li>• Nausea or vomiting</li> <li>• New or worsening chest discomfort, including pain or pressure</li> </ul>	<ul style="list-style-type: none"> <li>• Weight gain</li> <li>• Pain or discomfort in your arms, back, neck, or jaw</li> <li>• Protruding neck veins</li> <li>• Breaking out in a cold sweat</li> <li>• Feeling lightheaded or dizzy</li> </ul>
Lung Problems	<ul style="list-style-type: none"> <li>• Cough</li> <li>• Shortness of breath</li> </ul>	<ul style="list-style-type: none"> <li>• Chest pain</li> </ul>
Numbness, Tingling, or Burning in Your Hands or Feet (Peripheral Neuropathy)	<ul style="list-style-type: none"> <li>• New or worsening “pins and needles,” burning, or numbness in your hands or feet</li> </ul>	<ul style="list-style-type: none"> <li>• Trouble moving your arms or legs or weakness</li> <li>• Problems with balance or frequent falls</li> </ul>
Reduced Effects of the Hormone Cortisol (Adrenal Insufficiency)	<p>Relacorilant reduces the effect of an adrenal hormone called cortisol, which may be life-threatening and require hospitalization. This can happen at any time during treatment. Your risk of adrenal insufficiency is increased when your body is under stress, such as when you are sick, have an infection, or have surgery.</p> <ul style="list-style-type: none"> <li>• Feeling dizzy or lightheaded</li> <li>• Low blood pressure (hypotension)</li> <li>• Low blood sugar (hypoglycemia)</li> <li>• Worsening weakness or tiredness</li> <li>• Worsening nausea or vomiting</li> <li>• Worsening loss of appetite or weight loss</li> </ul>	
Extravasation	<p>Extravasation happens when medicine that is supposed to go into a vein leaks out into the tissues around it. This can cause pain, swelling, and damage to the skin and tissues.</p> <ul style="list-style-type: none"> <li>• Pain, burning, or stinging at the infusion site</li> <li>• Swelling, redness, or blistering around the site</li> <li>• Coolness or numbness in the area</li> <li>• Decreased blood flow or tissue damage, potentially leading to ulcers or tissue death in severe cases</li> </ul>	
Infusion-Related Reactions	<ul style="list-style-type: none"> <li>• Chills or shaking</li> <li>• Itching, rash, or flushing</li> <li>• Trouble breathing, wheezing, or tongue swelling</li> <li>• Dizziness or feeling faint</li> </ul>	<ul style="list-style-type: none"> <li>• Feeling of impending doom</li> <li>• Fever of 100.4°F (38°C) or higher</li> <li>• New or severe pain in your back or neck</li> </ul>

**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, for 1 week after your last dose of relacorilant, and for 6 months after your last dose of albumin-bound paclitaxel.
  - 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, for 1 week after you last dose of relacorilant, and for 3 months after your last dose of albumin-bound paclitaxel.
- **Do NOT breastfeed** during treatment, for 1 week after your last dose of relacorilant, and for 2 weeks after your last dose of albumin-bound paclitaxel.

## 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 **4 days** after each dose of **albumin-bound paclitaxel**: (Note: Relacorilant does not require special handling of body fluids and waste.)

- 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.
- **Do not take relacorilant if you are receiving or taking a steroid medicine** by mouth or injection (systemic glucocorticoid) for lifesaving purposes. Relacorilant can make glucocorticoid medicines less effective.
- **Worsening of Conditions Treated with Glucocorticoids.** Treatment with relacorilant in people who also take glucocorticoids for other conditions may worsen symptoms of these conditions. Relacorilant makes glucocorticoids less effective, and the use of glucocorticoids makes relacorilant less effective. If you take a glucocorticoid medicine during treatment with relacorilant, tell your care team if symptoms of your other condition get worse.
- **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: April 28, 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 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.

This guide does not cover all existing information related to the possible uses, directions, doses, precautions, warnings, interactions, adverse effects, or risks associated with this medication and should not substitute for the advice of a qualified healthcare professional. Provision of this guide is for informational purposes only and 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 related to taking this medication should be made with the guidance and under the direction of a qualified healthcare professional.

Permission: Patient Education Sheets are provided as a free educational resource for patients with cancer and their caregivers in need of concise, easy to understand information about cancer therapy. Healthcare providers are permitted to copy and distribute the sheets to patients as well as direct patients to the Patient Education Sheets website. However, commercial reproduction or reuse, as well as rebranding or reposting of any type, are strictly prohibited without permission of the copyright holders. Permission requests, including direct linking from Electronic Health Records, and licensing inquiries should be emailed to [patienteducationssheets@ncoda.org](mailto:patienteducationssheets@ncoda.org).

Copyright © 2026 by Network for Collaborative Oncology Development & Advancement, Inc. All rights reserved.

PES-601