TREATMENT MANAGEMENT - BARICITINIB



WHEN SHOULD I REDUCE THE DOSE?

(see relevant section 6.5 in BARI-protocol)

This also applies during weekends and holidays

Renal impairment

- eGFR \geq 30 to < 60 mL/min/1.73 m² \Rightarrow 2 mg once daily
- eGFR ≥ 15 to < 30 mL/min/1.73 m²
- ⇒ withdraw treatment or 2 mg once every 48 hours: according to PI opinion
- eGFR < 15 mL/min/1.73 m² or on dialysis ⇒ withdraw treatment

Drug interactions

- Simultaneous use of benzylpenicillin (penicillin-G) or probenecid
 - ⇒ Reduce to 2 mg once daily





WHEN SHOULD I DISCONTINUE BARICITINIB TEMPORARILY?

(see relevant section 7.1 in BARI-protocol)

Laboratory abnormality

- *ANC < 1000 cells/µL or
- *ALC < 200 cells/μL *or*
- Hb < 8.0 g/dL <u>or</u>
- AST and/or ALT > 5 times ULN

*on 1 sample



WHEN SHOULD I DISCONTINUE BARICITINIB PERMANENTLY? (see relevant section 7.1 in BARI-protocol)

Laboratory abnormality

- *WBC count < 1000 cells/μL <u>or</u>
- *ANC < 500 cells/μL <u>or</u>
- *ALC < 200 cells/μL <u>or</u>
- AST <u>or</u> ALT > 8 x ULN <u>or</u>
- AST <u>or</u> ALT > 3 x ULN <u>and</u> total bilirubin > 2 x ULN <u>or</u> INR > 1.5

*on 2 samples: 48 h to 7 days apart

Prohibited medication started (see exclusion criteria)

Exception: tocilizumab as rescue therapy according to the current version of the prot

- Pregnancy (see relevant section 10.1)
- Systemic hypersensitivity reaction
- New malignancy
- HIV infection (detectable HIV-RNA and/or AIDS)
- Tuberculosis (active or latent)
- Active CMV, HSV, hepatitis B (HBV-DNA) or C infection (HCV-RNA)
- Invasive fungal infection, including invasive pulmonary aspergillosis
- VTE (DVT/PE)
- Serious infection not responding to standard therapy
- Diverticulitis (including exacerbation of pre-existing diverticular disease)

Acronyms

ANC: Absolute Neutrophil Count **ALC**: Absolute Lymphocyte Count **ALT**: Alanine aminotransferase **AST**: Aspartate aminotransferase

CMV: Cytomegalovirus **DVT**: Deep Vein Thrombosis **eGFR**: estimated Glomerular Filtration Rate

Hb: Haemoglobin

HIV: Human Immunodeficiency Virus HSV : Herpes simplex virus PE: Pulmonary Embolism

ULN: Upper limit of normal

VTE: Venous ThromboEmbolism