

יוני 2023

**OPDIVO**  
**Concentrate for solution for infusion**  
**אופדיבו**  
**תמיסה מרוכזת להכנת תמיסה לעירו**

רופא/ה, רוקח/ת יקר/ה,

חברת בריסטול-מאיירס סקוויב (ישראל) מתכבדת להודיע על עדכון העלונים לרופא ולצרכן של התכשיר שבנדון.

התוויות התכשיר כפי שמאושרות ע"י משרד-הבריאות:

**Unresectable or Metastatic Melanoma**

OPDIVO, as monotherapy or in combination with ipilimumab is indicated for the treatment of advanced (unresectable or metastatic) melanoma in adults.

**Adjuvant Treatment of Melanoma**

OPDIVO is indicated for the adjuvant treatment of patients with melanoma with involvement of lymph nodes or metastatic disease who have undergone complete resection.

**Neoadjuvant Treatment of Resectable Non-Small Cell Lung Cancer**

OPDIVO, in combination with platinum-doublet chemotherapy, is indicated as neoadjuvant treatment of adult patients with resectable (tumors  $\geq 4$  cm or node positive) non-small cell lung cancer (NSCLC).

**Metastatic Non-Small Cell Lung Cancer**

- OPDIVO, in combination with ipilimumab and 2 cycles of platinum-doublet chemotherapy, is indicated for the first-line treatment of adult patients with metastatic or recurrent non-small cell lung cancer (NSCLC), with no EGFR or ALK genomic tumor aberrations.
- OPDIVO is indicated for the treatment of patients with metastatic non-small cell lung cancer (NSCLC) with progression on or after platinum-based chemotherapy.

**Malignant Pleural Mesothelioma**

OPDIVO, in combination with ipilimumab, is indicated for the first-line treatment of adult patients with unresectable malignant pleural mesothelioma.

**Advanced Renal Cell Carcinoma**

- OPDIVO, in combination with ipilimumab, is indicated for the first-line treatment of patients with intermediate or poor risk advanced renal cell carcinoma (RCC).
- OPDIVO, in combination with cabozantinib, is indicated for the first-line treatment of patients with advanced RCC.
- OPDIVO as a single agent is indicated for the treatment of patients with advanced renal cell carcinoma (RCC) who have received prior anti-angiogenic therapy.

**Classical Hodgkin Lymphoma**

OPDIVO is indicated for the treatment of adult patients with classical Hodgkin lymphoma (cHL) that has relapsed or progressed after:

- autologous hematopoietic stem cell transplantation (HSCT) and brentuximab vedotin, or
- 3 or more lines of systemic therapy that includes autologous HSCT.

### **Squamous Cell Carcinoma of the Head and Neck**

OPDIVO is indicated for the treatment of patients with recurrent or metastatic squamous cell carcinoma of the head and neck (SCCHN) with disease progression on or after platinum-based therapy.

### **Urothelial Carcinoma**

- OPDIVO is indicated for the adjuvant treatment of patients with urothelial carcinoma (UC) who are at high risk of recurrence after undergoing radical resection of UC.
- OPDIVO (Nivolumab) is indicated for the treatment of patients with locally advanced or metastatic urothelial carcinoma who:
  - have disease progression during or following platinum-containing chemotherapy
  - have disease progression within 12 months of neoadjuvant or adjuvant treatment with platinum-containing chemotherapy.

### **Microsatellite Instability-High (MSI-H) or Mismatch Repair Deficient (dMMR) Metastatic Colorectal Cancer**

OPDIVO, as a single agent or in combination with ipilimumab, is indicated for the treatment of adult and pediatric patients 12 years and older with microsatellite instability-high (MSI-H) or mismatch repair deficient (dMMR) metastatic colorectal cancer (CRC) that has progressed following treatment with a fluoropyrimidine, oxaliplatin, and irinotecan.

### **Hepatocellular Carcinoma**

OPDIVO, as a single agent or in combination with ipilimumab, is indicated for the treatment of patients with hepatocellular carcinoma (HCC) Child-Pugh A who have been previously treated with sorafenib.

### **Esophageal Cancer**

- OPDIVO is indicated for the adjuvant treatment of completely resected esophageal or gastroesophageal junction cancer with residual pathologic disease in patients who have received neoadjuvant chemoradiotherapy (CRT).
- OPDIVO in combination with fluoropyrimidine- and platinum-based combination chemotherapy is indicated for the first-line treatment of adult patients with unresectable advanced, recurrent or metastatic esophageal squamous cell carcinoma (ESCC) with tumor cell PD-L1 expression  $\geq 1\%$ .
- OPDIVO in combination with ipilimumab is indicated for the first-line treatment of adult patients with unresectable advanced, recurrent or metastatic esophageal squamous cell carcinoma (ESCC) with tumor cell PD-L1 expression  $\geq 1\%$ .
- OPDIVO is indicated for the treatment of patients with unresectable advanced, recurrent or metastatic esophageal squamous cell carcinoma (ESCC) after prior fluoropyrimidine- and platinum-based chemotherapy.

### **Gastric Cancer, Gastroesophageal Junction Cancer, and Esophageal Adenocarcinoma**

OPDIVO, in combination with fluoropyrimidine- and platinum-containing chemotherapy, is indicated for the treatment of patients with unresectable advanced or metastatic gastric cancer, gastroesophageal junction cancer, and esophageal adenocarcinoma.

המרכיב הפעיל: Nivolumab 10mg/ml

מהות העדכון בעלונים לרופא ולצרכן מתייחסת להארכת in-use time של התכשיר לאחר ההכנה, מ-24 שעות ל-7 ימים, וכוללת גם עדכון לפרק הזמן הנדרש לשימוש באמצעי-מניעה לאחר סיום הטיפול בתכשיר.

לעלון לרופא נוספו גם נתוני-המשך של Overall Survival במחקר CHECKMATE-9ER  
(1L advanced Renal Cell Carcinoma combination treatment - nivolumab and cabozantinib)  
כמפורט מטה.

השינויים העיקריים בעלון לרופא ובעלון לצרכן משוקפים בעמודים הבאים.  
תוספת טקסט מסומנת בקו תחתון, מחיקת טקסט בקו חוצה.

העלון לרופא והעלון לצרכן הנקיים נשלחו לפרסום במאגר התרופות שבאתר משרד-הבריאות  
וניתן לקבלם מודפסים על ידי פנייה לבעל הרישום בריסטול-מאיירס סקוויב (ישראל) בע"מ.

בברכה,  
לנה גיטלין  
מנהלת רגולציה ורוקחת ממונה  
בריסטול-מאיירס סקוויב (ישראל)

**OPDIVO (nivolumab 10 mg/mL)**

**Concentrate for solution for infusion**

## **FULL PRESCRIBING INFORMATION**

[...]

## **2 DOSAGE AND ADMINISTRATION**

[...]

### **2.4 Preparation and Administration**

[...]

#### Preparation

[...]

- After preparation, store the diluted solution either:
  - at room temperature and room light for no more than 8 hours from the time of preparation to end of the infusion. Discard diluted solution if not used within 8 hours from the time of preparation; or
  - under refrigeration at 2°C to 8°C (36°F to 46°F) and protected from light for no more than ~~24 hours~~ 7 days from the time of preparation to end of infusion. Discard diluted solution if not used within ~~24 hours~~ 7 days from the time of preparation.

[...]

## **5 WARNINGS AND PRECAUTIONS**

[...]

### **5.4 Embryo-Fetal Toxicity**

[...]

Advise pregnant women of the potential risk to a fetus. Advise females of reproductive potential to use effective contraception during treatment with OPDIVO and for ~~at least~~ 5 months after the last dose [see *Use in Specific Populations (8.1, 8.3)*].

[...]

## **8 USE IN SPECIFIC POPULATIONS**

[...]

### **8.3 Females and Males of Reproductive Potential**

#### Pregnancy Testing

Verify the pregnancy status of females of reproductive potential prior to initiating OPDIVO [see *Use in Specific Populations (8.1)*].

### Contraception

OPDIVO can cause fetal harm when administered to a pregnant woman [see *Use in Specific Populations (8.1)*]. Advise females of reproductive potential to use effective contraception during treatment with OPDIVO and for **at least** 5 months following the last dose.

[...]

## **14 CLINICAL STUDIES**

[...]

### **14.6 Advanced Renal Cell Carcinoma**

#### First line Renal Cell Carcinoma

[...]

#### *CHECKMATE-9ER*

[...]

An updated OS analysis was conducted when 271 deaths were observed based on the pre-specified number of deaths for the pre-planned final analysis of OS. Efficacy results are shown in Table 56 and Figures 13 and 14.

**Table 56: Efficacy Results - CHECKMATE-9ER**

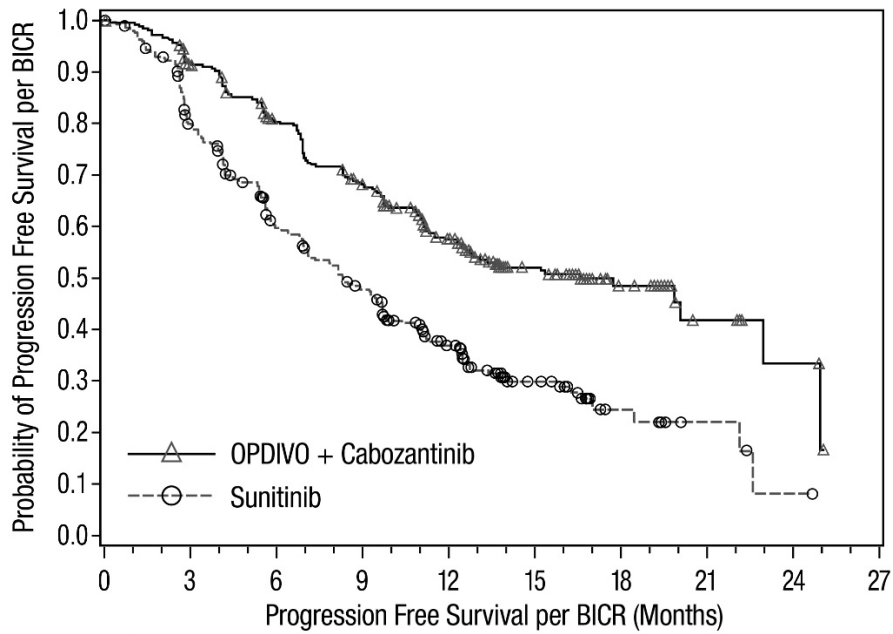
	<b>OPDIVO and Cabozantinib (n=323)</b>	<b>Sunitinib (n=328)</b>
<b>Progression-free Survival</b>		
Disease progression or death (%)	144 (45)	191 (58)
Median PFS (months) <sup>a</sup> (95% CI)	16.6 (12.5, 24.9)	8.3 (7.0, 9.7)
Hazard ratio (95% CI) <sup>b</sup>	0.51 (0.41, 0.64)	
p-value <sup>c,d</sup>	<0.0001	
<b>Overall Survival</b>		
Deaths (%)	67 (21)	99 (30)
Median OS (months) <sup>a</sup> (95% CI)	NR <sup>e</sup>	NR (22.6, NR <sup>e</sup> )
Hazard ratio (98.89% CI) <sup>b</sup>	0.60 (0.40, 0.89)	
p-value <sup>c,d,f</sup>	0.0010	
<b><u>Updated Overall Survival</u></b>		
<u>Deaths (%)</u>	<u>121 (37)</u>	<u>150 (46)</u>
<u>Median OS (months)<sup>a</sup> (95% CI)</u>	<u>37.7 (35.5, NR)</u>	<u>34.3 (29.0, NR)</u>
<u>Hazard ratio (95% CI)<sup>b</sup></u>	<u>0.70 (0.55, 0.90)</u>	
<b>Confirmed Objective Response Rate (95% CI)<sup>g</sup></b>	55.7% (50.1, 61.2)	27.1% (22.4, 32.3)
p-value <sup>h</sup>	<0.0001	
Complete Response	26 (8%)	15 (4.6%)
Partial Response	154 (48%)	74 (23%)

**Table 56: Efficacy Results - CHECKMATE-9ER**

	<b>OPDIVO and Cabozantinib (n=323)</b>	<b>Sunitinib (n=328)</b>
Median duration of response in months (95% CI) <sup>a</sup>	20.2 (17.3, NR <sup>e</sup> )	11.5 (8.3, 18.4)

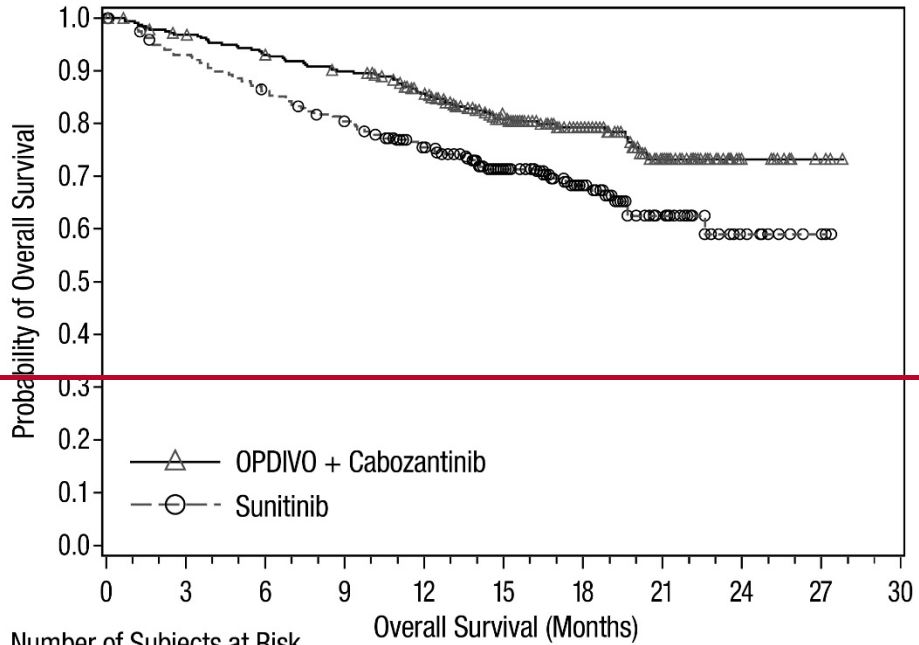
- <sup>a</sup> Based on Kaplan-Meier estimates.
- <sup>b</sup> Stratified Cox proportional hazards model.
- <sup>c</sup> Based on stratified log-rank test
- <sup>d</sup> 2-sided p-values from stratified log-rank test.
- <sup>e</sup> Not Reached
- <sup>f</sup> p-value is compared with the allocated alpha of 0.0111 for this interim analysis
- <sup>g</sup> CI based on the Clopper-Pearson method.
- <sup>h</sup> 2-sided p-value from Cochran-Mantel-Haenszel test.

**Figure 13: Progression-free Survival - CHECKMATE-9ER**

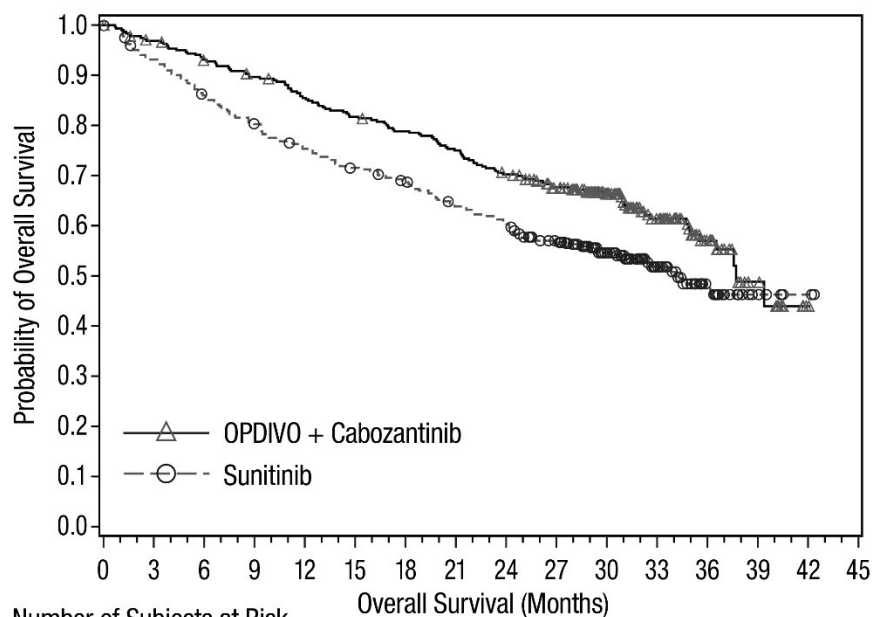


Number of Subjects at Risk		3	6	9	12	15	18	21	24	
OPDIVO + Cabozantinib	323	279	234	196	144	77	35	11	4	0
Sunitinib	328	228	159	122	79	31	10	4	1	0

Figure 14: **Updated Overall Survival - CHECKMATE-9ER**



	Number of Subjects at Risk										
	0	3	6	9	12	15	18	21	24	27	30
OPDIVO + Cabozantinib	323	308	295	283	259	184	106	55	11	3	0
Sunitinib	328	296	273	253	223	154	83	36	10	3	0



	Number of Subjects at Risk															
	0	3	6	9	12	15	18	21	24	27	30	33	36	39	42	45
OPDIVO + Cabozantinib	323	310	297	284	270	258	247	235	219	199	138	80	42	11	1	0
Sunitinib	328	299	275	257	239	226	215	198	187	166	109	59	23	6	2	0

In an exploratory analysis, the updated analysis of OS in patients with IMDC favorable, intermediate, intermediate/poor, and poor risk demonstrated a HR (95% CI) of 1.03 (0.55, 1.92), 0.74 (0.54, 1.01), 0.65 (0.50, 0.85), and 0.49 (0.31, 0.79), respectively.

[...]

## 16 HOW SUPPLIED/STORAGE AND HANDLING

[...]

After preparation of infusion:

The administration of the OPDIVO infusion (undiluted or diluted with 0.9% Sodium Chloride Injection (NS) or 5% Dextrose Injection (D5W)) must be completed within 24 hours 7 days of preparation. If not used immediately, the solution may be stored under refrigeration conditions: 2°C to 8°C and protected from light for up to 24h-7 days (a maximum of 8h of the total 24h-7 days can be at room temperature 20°C to 25°C and room light – the maximum 8h period under room temperature and room light conditions should be inclusive of the product administration period).

[...]



# שינויים עיקריים בעלון לצרכן:

עלון לצרכן לפי תקנות הרוקחים (תכשירים) התשמ"ו – 1986  
התרופה משווקת על פי מרשם רופא בלבד

## אופדיבו

### תמיסה מרוכזת להכנת תמיסה לעירוי תוך ורידי

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#### 2. לפני השימוש בתרופה:

...

#### היריון והנקה

...

#### נשים היכולות להרות:

- על הרופא המטפל לערוך בדיקת היריון לפני שאת מתחילה לקבל אופדיבו.
- עלייך להשתמש באמצעי מניעה יעיל במהלך הטיפול ולפחות במשך 5 חודשים לאחר מתן המנה האחרונה של אופדיבו. היוועצי ברופא המטפל לגבי אמצעי המניעה שבהם תוכלי להשתמש בתקופה זו.
- דווחי לרופא המטפל באופן מיידי אם נכנסת להיריון במהלך הטיפול עם אופדיבו.

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#### 5. איך לאחסן את התרופה?

...

- אחרי ההכנה של העירוי: יש להשלים את מתן העירוי תוך 24 שעות 7 ימים מרגע ההכנה. אם העירוי לא ניתן מיידי, ניתן לאחסן את אופדיבו לאחר הכנה:
  - בטמפרטורת חדר (20°C-25°C) ותאורת חדר לפרק זמן של לא יותר מ-8 שעות (מתוך 24 השעות 7 הימים) מזמן ההכנה ועד סיום מתן העירוי.
  - או
  - בקירור בטמפרטורה של 2°C-8°C ומוגן מאור לפרק זמן של עד 24 שעות 7 ימים מרגע ההכנה ועד לסיום המתן.

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## מידע לצוות הרפואי

معلومات للطاقم الطبي

Information for Healthcare professionals

### Preparation and Administration

...

#### Preparation

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- After preparation, store the diluted solution either:
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