SACITUZUMAB GOVITECAN

BRAND NAME	TRODELVY
DRUG CLASS	Cytotoxic antineoplastic plus non-cytotoxic antineoplastic monoclonal antibody
AVAILABILITY	Vial contains 180 mg of sacituzumab govitecan. Also contains 2-N-morpholinoethanesulfonic acid monohydrate, polysorbate-80 and trehalose dihydrate.[1]
WARNINGS	Cytotoxic. Strict handling precautions are required. Sacituzumab govitecan is a cytotoxic drug attached to a monoclonal antibody. Severe hypersensitivity and anaphylactic reactions may occur. Resuscitation facilities must be readily available.[1]
pH	6.5 when reconstituted[1]
PREPARATION	**In a cytotoxic drug safety cabinet**: Reconstitute the vial with 20 mL of sodium chloride 0.9% to make a concentration of 10 mg/mL. Swirl the vial gently. **Do not shake**. Allow the vial to stand for up to 15 minutes or until completely dissolved.[1] The solution is clear and yellow.[1] Dilute the dose in up to 500 mL of sodium chloride 0.9%. Invert the bag gently to mix to avoid foaming. **Do not shake**.[1] The concentration should be between 1.1 mg/mL and 3.4 mg/mL.[1]
STABILITY	Vial: store at 2 to 8 °C. Do not freeze. Protect from light.[1] Reconstituted solution: use immediately.[1] Infusion solution: stable for 4 hours at 2 to 8 °C. Protect from light. After refrigeration, stable for 6 hours including infusion time.[1]
ADMINISTRATION	
IM injection	Not recommended
SUBCUT injection	Not recommended
IV injection	Not recommended
IV infusion	Infuse the first dose over 3 hours. If the initial infusion is well tolerated, subsequent doses can be infused over 1 to 2 hours. Protect the infusion bag from light. It is not necessary to cover the infusion tube.[1]
COMPATIBILITY	Sodium chloride 0.9%[1]
INCOMPATIBILITY	Do not mix with other medicines
SPECIAL NOTES	Infusion reactions are common. Premedication with paracetamol, a H_1 antagonist and a H_2 antagonist is required and a corticosteroid may be used for people who have had prior infusion reactions.[1,2] Check your local guidelines. Monitor for possible anaphylactic and infusion reactions during and for at least 30 minutes after each infusion. Stop or slow the infusion and treat accordingly.[1,2] Anaphylactic reactions are rare but are a medical emergency. Stop the infusion and commence treatment immediately. Diarrhoea that starts within 24 hours of starting sacituzumab govitecan is usually transient and may occur with other cholinergic symptoms such as rhinitis, increased salivation, miosis, sweating, lacrimation, flushing and abdominal cramping. Stop the infusion and monitor vital signs. Atropine may be given subcutaneously or IV as a pre-med.[1,2] Diarrhoea that starts later can be prolonged and may be life-threatening. Make sure patients have loperamide available at home so that treatment can start at the first sign of loose stools.[1,2] Sacituzumab govitecan is highly emetogenic. Check your local guidelines for premedication requirements.[1,2]

REFERENCES

1. Product information. Available from www.tga.gov.au. Accessed 10/06/2022.
2. Clinical resource: Breast metastatic sacituzumab govitecan [v1 March 2022]. eviQ [internet]. Sydney: Cancer Institute NSW. Available from www.eviq.org.au. Accessed 10/06/2022.