

About your treatment with ZYNLONTA▼ (loncastuximab tesirine)



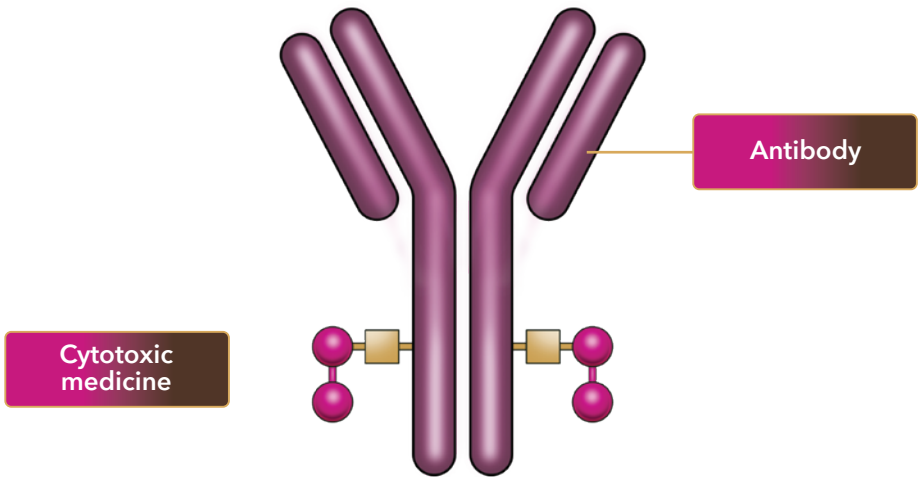
This booklet is for patients who have been prescribed ZYNLONTA by their healthcare team, and their families/carers. It should be used in conjunction with the Patient Information Leaflet. Please refer to the Patient Information Leaflet for full information.

▼ This medicine is subject to additional monitoring. This will allow quick identification of new safety information. You can help by reporting any side effects you may get. If you get any side effects, talk to your doctor, pharmacist or nurse. This includes any possible side effects not listed in the package leaflet. You can also report side effects directly, via the Yellow Card Scheme at www.mhra.gov.uk/yellowcard or search for MHRA Yellow Card in the Google Play or Apple App Store. Side effects should also be reported to Swedish Orphan Biovitrum Ltd by email at medical.info.uk@sobi.com or by calling +44 (0) 800 111 4754.

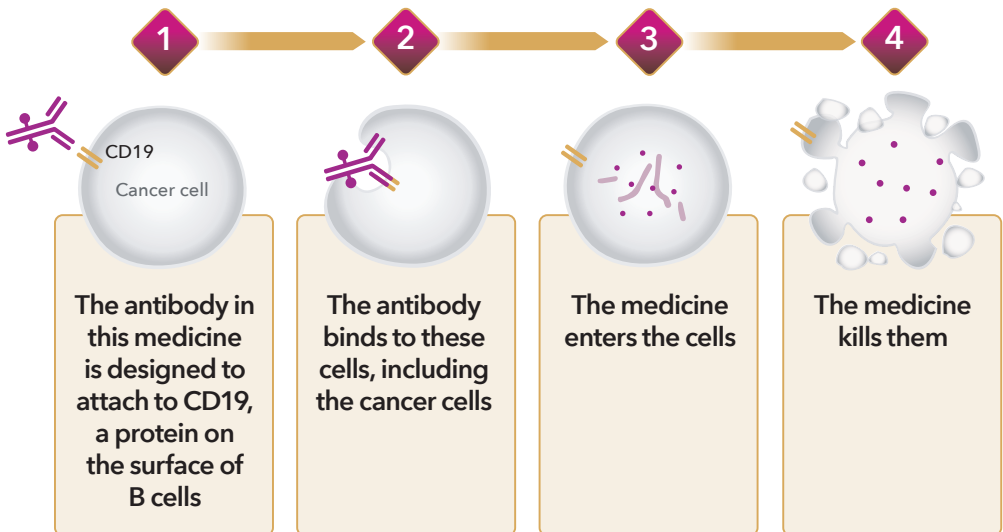
▼ **Zynlonta** 
loncastuximab tesirine
for injection, for intravenous use • 10mg

 sobi

What is Zynlonta?¹



How does it work?¹



Why have I been prescribed Zynlonta?

You have been prescribed Zynlonta to treat your diffuse large B-cell lymphoma (DLBCL). It is used when your DLBCL has:¹

- **Come back (relapsed) after you have received two or more treatments; or**
- **Not responded to previous treatments (refractory)**

This booklet aims to answer some of your questions and offer guidance. You can also talk to your healthcare team about any other questions you may have.

What is Zynlonta?

It is a cancer medicine for DLBCL that contains the active substance, loncastuximab tesirine.

Consists of two parts:

- **An antibody (a type of protein that is designed to recognise and attach to a specific target)**
- **A cytotoxic agent (a medicine that is able to kill cells, including cancer cells - see diagram opposite)**

Is Zynlonta chemotherapy?

No, it is not a traditional chemotherapy.






How will I be given Zynlonta?

Zynlonta is given under supervision of a doctor experienced in giving such treatments. It is given into a vein as a drip (infusion) over a period of 30 minutes.¹

The dose of Zynlonta depends on your body weight. The usual starting dose is 0.15 mg for each kg of body weight (see treatment schedule table below).¹

Zynlonta treatment schedule¹

| Before each infusion | Single infusion | | |
|---|--|---|--|
| Dexamethasone before Zynlonta Dexamethasone 4 mg (oral or intravenous) twice daily for 3 days, beginning the day before Zynlonta infusion | One infusion  | Over 30 minutes  | Once every 3 weeks  |
| 0.15 mg per kg body weight every 21 days | 0.15 mg per kg body weight every 21 days | 0.075 mg per kg body weight every 21 days | |
| 1st cycle | 2nd cycle | 3rd cycle onwards | |

Your doctor may lower your dose if you experience any serious side effects.

What can I expect from treatment?

DLBCL is a very variable disease – it does not affect every individual the same way. Likewise, not everyone will respond in the same way to Zynlonta.²

You should discuss your individual treatment goals and expectations with your healthcare team.

Taking dexamethasone with Zynlonta

During your treatment with Zynlonta you will also be given another medicine called dexamethasone to help reduce side effects as a result of treatment.^{1,3}

You will be given 4 mg of dexamethasone either by mouth or into your vein twice a day for three days, beginning the day before you receive Zynlonta treatment. If you do not receive dexamethasone the day before your treatment, then it must be given at least 2 hours before you are given Zynlonta.

How often will I be given Zynlonta?

It is usually given every 3 weeks (on day 1 of a 21-day cycle).¹

- Your doctor will give you medicines before each infusion to lower your chance of side effects.



CHANGE
your dose



DELAY
your dose



STOP
treatment

- Your doctor may stop your treatment, delay your treatment, or change your dose of Zynlonta if you have severe side effects.
- Your doctor will do regular blood tests to check for side effects.
- Your doctor will decide how many treatment cycles you need.

What if I am given more Zynlonta than I should?

Since the infusion is given to you by your doctor or other appropriately trained staff, an overdose is unlikely. If you inadvertently receive too much medicine, your doctor will monitor you and give you additional treatment as required.¹

What if I miss a dose of Zynlonta?

If you miss a dose, it should then be given as soon as possible. You might need to reschedule receiving the next planned dose to ensure that it is given 21 days after the missed dose. The 21-day interval between doses should be maintained.¹

What if I stop receiving Zynlonta?

You should not stop the therapy early without talking with your doctor first. The therapy for lymphoma with Zynlonta usually requires a number of infusions. The number of infusions that you receive will depend on how you are responding to treatment. Therefore, even if you see your symptoms improve, you should continue to take Zynlonta until your doctor decides that your medicine should be stopped. If the treatment is stopped too early, your symptoms may return. **If you have any further questions on the use of this medicine, ask your doctor or nurse.**¹



What side effects could I get with Zynlonta?

Like all medicines, Zynlonta can cause side effects, although not everybody gets them. The following side effects have been reported with this medicine:

Serious side effects¹

Infections

Serious infections, including infections that can cause death, have occurred in people treated with Zynlonta.

Tell your doctor or nurse straight away if you notice any of the following signs and symptoms:

- Fever
- Chills
- Flu-like symptoms (cough, tiredness or weakness, and body aches)
- Severe headache
- Cuts or scrapes that are red, warm, swollen, or painful

Fluid retention

Your body may hold too much fluid during treatment with Zynlonta. This can be serious. You can get swelling in various parts of your body including your hands, feet (very common) and abdomen (common), or around internal organs such as your heart (common) and lungs (very common).

Tell your doctor or nurse straight away if you notice any of the following signs and symptoms:

- Have chest pain (common)
- Difficulty breathing (very common)
- Swelling in any part of your body (very common)

Low blood cell counts

Low blood cell counts (very common) can be serious or severe. Your doctor or nurse will monitor your blood counts during treatment with Zynlonta.

Tell your doctor or nurse straight away if you notice any bruising or bleeding, or any of the signs and symptoms of infections.

Skin reactions

Skin reactions (common) have occurred in people treated with Zynlonta. Some of these can be serious.

Tell your doctor or nurse straight away if you get new or worsening severe skin reactions, including:

- Sensitivity to sunlight including sunburn-like reactions, such as skin peeling and irritation following exposure to light
- Itchy rash
- Blistering of skin
- Darker skin patches
- Irritation, swelling, pain, and/or skin damage at the injection site

Other side effects¹

Tell your doctor or nurse if you notice any of the following side effects:

Very common:

May affect more than 1 in 10 people

- Tiredness and pale skin
- Abnormal blood tests showing:
 - Low levels of neutrophils, a type of white blood cell that fight infection, sometimes with fever
 - Low blood platelet count, which can lead to bleeding and bruising
 - Liver problems
- Loss of appetite
- Feeling sick or vomiting
- Diarrhoea
- Stomach pain
- Constipation
- Reddening of the skin
- Rash
- Itching

Common:

May affect up to 1 in 10 people

- Infection of the lungs, including bronchitis or pneumonia
- Nose and throat infection
- Rash characterised by a flat, red area on the skin that is covered with small, raised bumps
- Muscle pain
- Joint pain
- Back and neck pain
- Pain in the arms and legs
- Lack of energy

Uncommon:

May affect less than 1 in 10 people

- Pus filled raised bumps on the skin
- Limb discomfort
- Muscle and bone discomfort
- Inflammation of the membrane around the heart

Not known:

Frequency cannot be estimated from the available data

- Spider veins (broken blood vessels located near surface of skin)
- Blisters
- Rash consisting of tiny-to-small fluid-filled blisters

Reporting of side effects

If you get any side effects, talk to your doctor, pharmacist or nurse. This includes any possible side effects not listed in the package leaflet or this patient booklet. You can also report side effects directly, via the Yellow Card Scheme at www.mhra.gov.uk/yellowcard or search for MHRA Yellow Card in the Google Play or Apple App Store. Side effects should also be reported to Swedish Orphan Biovitrum Ltd by email at medical.info.uk@sobi.com or by calling +44 (0) 800 111 4754.

Warnings and precautions¹

Talk to your doctor or nurse before you are given Zynlonta if you:

- Have an **active infection** or have had one recently
- Have **liver problems**; symptoms may include skin and eyes appearing yellowish (jaundice). Your doctor will monitor you for side effects during treatment
- Are **pregnant or plan to become pregnant**. Zynlonta can harm your unborn baby

Children and adolescents

This medicine should not be given to children or young people under the age of 18. This is because there is no information about its use in this age group.

Other medicines and Zynlonta

Tell your doctor if you are taking, have recently taken or might **take any other medicines**.

Contraception (men and women)

Women of child-bearing potential must use effective contraception during treatment with Zynlonta, and for 10 months after the last dose. **Men** with partners of child-bearing potential **must use effective contraception** during treatment with Zynlonta, and for 7 months after the last dose.

Talk to your doctor about effective contraception.

Pregnancy

You should avoid getting pregnant if you are taking this medicine. **Tell your doctor immediately** if you become pregnant or think that you are pregnant during treatment with Zynlonta. Your doctor may do a pregnancy test before starting treatment with Zynlonta.

Breast-feeding

Do not breast-feed during treatment, and for 3 months after the last dose. It is not known if Zynlonta passes into breast milk.

Fertility

Zynlonta **may cause fertility problems in men**, which may affect their ability to father children. You can seek advice on how to preserve sperm before starting treatment. Talk to your doctor for more information.

Driving and using machines

Zynlonta has no or negligible influence on your ability to drive and use machines. If you get infusion-related reactions or if you feel tired, weak or dizzy do not drive, cycle or use tools or machines until you feel better.

Some practical tips to help with side effects

Your healthcare team are the experts at helping you manage any treatment side effects. They will have lots of advice and knowledge to give you – so always mention any issues you are experiencing to them. They will want to know how you are, and help with your treatment.



Skin reactions:

- Minimise or avoid exposure to direct natural or artificial light, including exposure through glass windows⁴
- Protect skin from exposure to sunlight by wearing sun-protective clothing (such as a hat) and/or the use of sunscreen products - even if the weather appears overcast^{4,5}
- Use mild soaps and non-perfumed lotions⁵
- Shower in lukewarm water⁵



Feeling tired or weak:

- Don't be embarrassed to ask your family, friends or carer for help in doing things – they will want to help you⁵
- Continue to keep active and do light exercise – balance this with rest and short naps if needed⁵
- Follow good eating and drinking habits – drink water and limit alcohol and caffeine⁵



Swelling:

- Wear loose clothing⁵
- Prop up your feet when sitting or lying
- Eat a low-salt diet – salt may make any swelling worse⁵



General well-being & muscle pain:

- Keep doing the things that you enjoy – seeing family and friends, hobbies, etc.⁵
- Try deep breathing, meditation and other stress-relieving routines⁵
- Take any pain medicine as prescribed, and keep track of your pain levels. Make a note of what helps to reduce your pain, and tell your healthcare team⁵

Where can I get further information?

The best people to talk to about any questions or concerns you have regarding DLBCL, or your treatment, is your healthcare team.

You can also get more information from the full Patient Information Leaflet that you received with your first Zynlonta treatment. This can also be accessed here:

Zynlonta Patient Information Leaflet

Available at www.medicines.org.uk/emc/files/pil.14786.pdf

You can also get information, advice and support from Lymphoma Action – the UK's only charity dedicated to lymphoma.

<https://lymphoma-action.org.uk>

This booklet has been vetted by Lymphoma Action and permission provided to share website details.



Important contact information and numbers

DLBCL doesn't affect who you are as a person. Your treatment journey and goals are unique to you. These pages are intended to help you plan your journey and keep track of your progress.

Consultant:

Clinical Nurse Specialist:

Centre switchboard::

GP:

Infusion dates and timings

Dates / times:

Notes:

Thoughts and reflections

Note down here your personal thoughts and reflections, or discussions with family, friends, carers, etc.

Questions for your healthcare team

Note down here in advance any questions that you want to ask your healthcare team.



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