Glossary A-Z

Wirkstoffe T

Tafasitamab - Monjuvi®

Navigation überspringen A B C D E F G H I K L M N O P Q R W T U V Z

According to the NCI website, Tafasitamab is an Fc engineered, humanized anti-CD19 monoclonal antibody directed against the B-cell-specific membrane protein CD19 with potential immunostimulating and antineoplastic activities.Tafasitamab targets and binds to CD19, thereby depleting and eliminating CD19-expressing B cells. The modified Fc region of XmAb5574 increases binding affinity to Fc-gamma receptors of effector cells and thereby enhances antibody-dependent cellular cytotoxicity (ADCC) and antibody-dependent cell-mediated phagocytosis (ADCP). CD19 is widely expressed during B-cell development, from pro-B-cell to early plasma cell stages. Check for active clinical trials using this agent. (NCI Thesaurus)

July 31, 2020: FDA approved **for use in combination with lenalidomide (BMS/Celgene's Revlimid) in adult relapsed/refractory diffuse large B-cell lymphoma (DLBCL).**

More Information in English:

Inxight: Drugs (NIH)

AdisInsight

Link to Drug Information Portal, a service of the U.S. National Library of Medicine, National Institutes of Health
Link to National Cancer Institute

Wiki
Link to European Medicines Agency (EMEA)

Tagraxofusp – Elzonris® (USA)

According to the NCI website, Tagraxofusp is a recombinant protein consisting of human interleukin 3 (IL3) fused to the first 388 amino acids of diphtheria toxin [DT(388)] (DT388IL3) with potential antineoplastic activity. Upon intravenous administration, the IL3 moiety of the tagraxofusp-erzs binds to IL3 receptors on cells expressing the receptor. Subsequently, the DT(388) toxin moiety, which contains both translocation and catalytic domains, is transported across the cell membrane via endocytosis. Within the cytosol, the catalytic domain of the toxin both catalyzes the ADP-ribosylation of, and inactivates, translation elongation factor 2 (EF-2), which results in the inhibition of translation during protein synthesis. IL3 may be overexpressed by a variety of cancers, including blastic plasmacytoid dendritic cell neoplasm and acute myeloid leukemia (AML). Check for active clinical trials using this agent. (NCI Thesaurus)

Patient information

- **Tazemetostat is used to treat locally advanced and metastatic epithelioid sarcoma.**

More Information in English:

Link to Drug Information Portal, a service of the U.S. National Library of Medicine, National Institutes of Health

Link to MedlinePlus, a service of the U.S. National Library of Medicine, National Institutes of Health
Link to National Cancer Institute

Wiki

Info for Patients presented by Scott Hamilton from Chemocare.com

Talazoparib - TALZENNA®

According to the NCI website, talazoparib tosylate is an orally bioavailable inhibitor of the nuclear enzyme poly(ADP-ribose) polymerase (PARP) with potential antineoplastic activity. Talazoparib tosylate selectively binds to PARP and prevents PARP-mediated DNA repair of single strand DNA breaks via the base-excision repair pathway. This enhances the accumulation of DNA strand breaks, promotes genomic instability and eventually leads to apoptosis. PARP catalyzes post-translational ADP-ribosylation of

nuclear proteins that signal and recruit other proteins to repair damaged DNA and is activated by single-strand DNA breaks. Check for active clinical trials using this agent. (NCI Thesaurus)

Indikationen/Anwendungsmöglichkeiten gemäss Arzneimittel-Kompendium der Schweiz®:

Talzenna ist indiziert zur Behandlung von erwachsenen Patienten mit lokal fortgeschrittenem oder metastasiertem humanen epidermalen Wachstumsfaktor-Rezeptor-2 (HER2)-negativem Mammakarzinom mit einer Keimbahn-BRCA-Mutation, die zuvor mit einem Anthracyclin und/oder einem Taxan (sofern nicht kontraindiziert) entweder in neoadjuvanter, adjuvanter oder lokal fortgeschrittener/metastasierter Situation behandelt wurden.

Patienten mit Hormonrezeptor (HR)-positivem Brustkrebs sollen unter angemessener vorangegangener endokriner Therapie eine Progression gezeigt haben, oder für eine endokrine Behandlung als ungeeignet angesehen werden.

Merkblätter für Patientinnen und Patienten **(Stand 6.4.2020: noch nicht vorhanden)**

Link zur Fachinformation des Compendium®:

Medizinalpersonen

Patienteninformation

Information des Médicaments: Info prof. Info patient

Informazione sul medicamento: info per il paziente

More Information in English:

More Information in English:

Link to Drug Information Portal, a service of the U.S. National Library of Medicine, National Institutes of Health

Link to MedlinePlus, a service of the U.S. National Library of Medicine, National Institutes of Health
Link to National Cancer Institute

Wiki

Link zu PharmaWiki
Link to Physicians Desk Reference (PDR)
Link to European Medicines Agency (EMEA)
Info for Patients presented by Scott Hamilton from Chemocare.com

Tamoxifen / NOVALDEX® sowie Generika

Tamoxifen - Nolvadex® sowie Generika: Tamoxifen Citrat ist das Citratsalz des antineoplastischen nichtsteroidalen selektiven Östrogenrezeptor-Modulators (SERM) Tamoxifen. Tamoxifen hemmt kompetitiv die Bindung von Östradiol an die Östrogenrezeptoren, wodurch die Bindung des Rezeptors zum Östrogen-Response-Element auf der DNA verhindert wird. Das Ergebnis ist eine Verringerung der DNA-Synthese und Zellreaktion auf Östrogen. Zusätzlich wird die Herstellung von transformierendem Wachstumsfaktor B (TGFb) durch Tamoxifen heraufreguliert. Dieser Faktor hemmt das Wachstum von Tumorzellen und vermindert die Expression des insulinähnlichen Wachstumsfaktors 1 (IGF-1), ein Faktor, der das Zellwachstum von Brustkrebs fördert . Tamoxifen vermindert auch dosisabhängig die Expression der Proteinkinase C (PKC), wodurch die Signaltransduktion gehemmt wird, was eine antiproliferative Wirkung in Tumoren wie dem malignem Gliom und anderen Krebsarten hat, die PKC überexprimieren.

Indikationen/Anwendungsmöglichkeiten gemäss Compendium®:

- Adjuvante Therapie des Mammakarzinoms,
- palliative Therapie des metastasierten Mammakarzinoms
- palliative Therapie des lokal fortgeschrittenen Mammakarzinoms.

Merkblätter für Patientinnen und Patienten

Link zur Fachinformation des Compendium®:

Medikamenteniformation: Für den Arzt Patienteninformation

Information des Médicaments: Info prof. Info patient

Informazione sul medicamento: info per il paziente

More Information in English:

Link to Drug Information Portal, a service of the U.S. National Library of Medicine, National Institutes of Health

Link to National Cancer Institute
Link zu Wiki
Link zu PharmaWiki
Link to Physicians Desk Reference (PDR)

More Information for patients:

Link to MedlinePlus

Info for Patients presented by Scott Hamilton from Chemocare.com

SERM

Taselisib

According to the NCI website, taselisib is an orally bioavailable inhibitor of the class I phosphatidylinositol 3-kinase (PI3K) alpha isoform (PIK3CA), with potential antineoplastic activity. Taselisib selectively

inhibits PIK3CA and its mutant forms in the PI3K/Akt/mTOR pathway, which may result in tumor cell apoptosis and growth inhibition in PIK3CA-expressing tumor cells. By specifically targeting class I PI3K alpha, this agent may be more efficacious and less toxic than pan PI3K inhibitors. Dysregulation of the PI3K/Akt/mTOR pathway is frequently found in solid tumors and causes increased tumor cell growth, survival, and resistance to both chemotherapy and radiotherapy. PIK3CA, which encodes the p110-alpha catalytic subunit of the class I PI3K, is mutated in a variety of cancer cell types and plays a key role in cancer cell growth and invasion.

More Information in English:

Link to Drug Information Portal, a service of the U.S. National Library of Medicine, National Institutes of Health

Link to National Cancer Institute

Wiki

Phosphoinositide 3-kinase inhibitor

Tavolimab - anti-OX40 monoclonal antibody MEDI0562

According to the NCI website, Tavolimab is an agonistic, humanized monoclonal antibody against receptor OX40 (CD134), with potential immunostimulatory activity. Upon administration, anti-OX40 monoclonal antibody MEDI0562 selectively binds to and activates the OX40 receptor. OX40 receptor activation induces proliferation of memory and effector T-lymphocytes. In the presence of tumor-associated antigens (TAAs), this agent may promote an immune response against TAAs-expressing tumor cells. OX40, a cell surface glycoprotein and member of the tumor necrosis factor (TNF) receptor family, is expressed on T-lymphocytes and provides a co-stimulatory signal for the proliferation and survival of activated T-cells. Check for active clinical trials using this agent. (NCI Thesaurus)

Link to Drug Information Portal, a service of the U.S. National Library of Medicine, National Institutes of Health
Link to National Cancer Institute

Tazemetostat - Tazverik® (USA)

According to the NCI website, *tazemetostat hydrobromide* is the hydrobromide salt form of tazemetostat, an orally available, small molecule selective and S-adenosyl methionine (SAM) competitive inhibitor of histone methyl transferase EZH2, with potential antineoplastic activity. Upon oral administration, tazemetostat selectively inhibits the activity of both wild-type and mutated forms of EZH2. Inhibition of EZH2 specifically prevents the methylation of histone H3 lysine 27 (H3K27). This decrease in histone methylation alters gene expression patterns associated with cancer pathways and results in decreased tumor cell proliferation in EZH2 mutated cancer cells. EZH2, which belongs to the class of histone methyltransferases (HMTs), is overexpressed or mutated in a variety of cancer cells and plays a key role in tumor cell proliferation. Check for active clinical trials using this agent. (NCI Thesaurus)

Patient Information

Indikationen/Anwendungsmöglichkeiten gemäss FDA:

- **Epithelioid sarcoma** that is locally advanced or has metastasized (spread to other parts of the body). It is used in adults and in children aged 16 years or older whose disease cannot be removed by surgery.

This use is approved under FDA's Accelerated Approval Program. As a condition of approval, confirmatory trial(s) must show that tazemetostat hydrobromide provides a clinical benefit in these patients.

More Information in English:

Link to Drug Information Portal, a service of the U.S. National Library of Medicine, National Institutes of Health

Link to MedlinePlus, a service of the U.S. National Library of Medicine, National Institutes of Health
Link to National Cancer Institute

Wiki
Link to European Medicines Agency (EMEA)

Info for Patients presented by Scott Hamilton from Chemocare.com

Tecemotide (L-BLP25) or emepepimut

L-BLP25 is an investigational MUC1 antigen-specific cancer immunotherapy that is designed to stimulate the body's immune system to identify and target cells expressing the cell surface glycoprotein MUC1. MUC1 is expressed in many cancers, such as non-small cell lung cancer (NSCLC), and has multiple roles in promoting tumor growth and survival. L-BLP25 was being investigated in the Phase III START trial and is currently being investigated in the INSPIRE trial, both for the treatment of unresectable stage III NSCLC

According to the NCI website, emepepimut-SA is a liposome-encapsulated peptide vaccine consisting of a synthetic peptide derived from the mucin 1 (MUC-1) antigen with potential antineoplastic activity. Upon vaccination, emepepimut-S may stimulate the host immune system to mount a cytotoxic T lymphocyte (CTL) response against MUC-1-expressing tumor cells, resulting in growth inhibition. MUC-1 antigen is a high-molecular-weight transmembrane glycoprotein that is overexpressed on the cell surfaces of many epithelial tumor cells as well as on the cell surfaces of some B-cell lymphoma cells and multiple myeloma cells. Check for active clinical trials using this agent. (NCI Thesaurus)

Link to Drug Information Portal, a service of the U.S. National Library of Medicine, National Institutes of Health

Link to National Cancer Institute

Notable treatment effects were observed for L-BLP25 in certain subgroups in the START study

MUC1

Teclistamab - or anti-CD3/anti-BCMA bispecific monoclonal antibody

According to the NCI website, Teclistamab or ***anti-CD3/anti-BCMA bispecific monoclonal antibody JNJ-64007957*** is a bispecific humanized monoclonal antibody against human CD3, a T-cell surface antigen, and human B-cell maturation antigen (BCMA; TNFRSF17), a tumor-associated antigen (TAA) expressed on plasma cells, with potential antineoplastic activity. Upon administration, anti-CD3/anti-BCMA bispecific monoclonal antibody JNJ-64007957 binds to both CD3 on T cells and BCMA expressed on malignant plasma cells. This results in the cross-linking of T cells and tumor cells, and induces a potent cytotoxic T-lymphocyte (CTL) response against BCMA-expressing plasma cells. BCMA, a member of the tumor necrosis factor receptor superfamily member that is specifically overexpressed on malignant plasma cells, plays a key role in promoting plasma cell survival. Check for active clinical trials using this agent. (NCI Thesaurus)

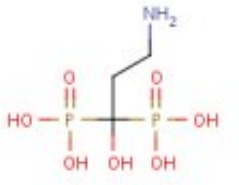
Link to National Cancer Institute

Telaglenastat

According to the NCI website, Telaglenastat is an orally bioavailable inhibitor of glutaminase, with potential antineoplastic activity. Upon oral administration, telaglenastat selectively and irreversibly inhibits glutaminase, a mitochondrial enzyme that is essential for the conversion of the amino acid glutamine into glutamate. By blocking glutamine utilization, proliferation in rapidly growing cells is impaired. Glutamine-dependent tumors rely on the conversion of exogenous glutamine into glutamate and glutamate metabolites to both provide energy and generate building blocks for the production of macromolecules, which are needed for cellular growth and survival. Check for active clinical trials using this agent. (NCI Thesaurus)

Link to National Cancer Institute

Temozolomid - TEMODAL® und Generika



Temozolomid - Temodal® und Generika sind Triazen Analoga von Dacarbazin mit einer antineoplastischen Aktivität. Als zytotoxisches Alkylierungsmittel wird Temozolomid bei physiologischem pH zur kurzlebigen aktiven Verbindung Monomethylether Triazen-Imidazol Carboxamid (MTIC) umgewandelt. Die Zytotoxizität von MTIC ist vor allem auf die Methylierung von DNA an den Positionen O6 und N7 von Guanin zurückzuführen, was zur Hemmung der DNA-Replikation führt. Im Gegensatz zu Dacarbazin, das nur in der Leber zu MITC metabolisiert wird, kann Temozolomid an allen Standorten zu MITC metabolisiert werden. Temozolomid passiert auch in das zentrale Nervensystem.

Indikationen/Anwendungsmöglichkeiten gemäss Compendium®:

Temodal ist indiziert zur Behandlung von:

- neu diagnostiziertem Glioblastoma multiforme in Kombination mit Radiotherapie und anschliessend als Maintenance-Therapie
- rezidivierenden malignen Gliomen wie Glioblastoma multiforme und anaplastischem Astrozytom.

Merkblatt für Patientinnen und Patienten

Link zur Fachinformation des Compendium®:

Medikamenteniformation: Für den Arzt Patienteninformation

Information des Médicaments: Info prof. Info patient

Informazione sul medicamento: info per il paziente

More information in English:
Link to Drug Information Portal
Link to National Cancer Institute
Link zu Wiki
Link zu PharmaWiki
Link to Physicians Desk Reference (PDR)
Link to European Medicines Agency (EMEA)

More information for patients:

Link to MedlinePlus
Info for Patients presented by Scott Hamilton from Chemocare.com

Alkylanzien

Temsirolimus - TORISEL®

According to the NCI temsirolimus is an ester analog of rapamycin. Temsirolimus binds to and inhibits the mammalian target of rapamycin (mTOR), resulting in decreased expression of mRNAs necessary for cell cycle progression and arresting cells in the G1 phase of the cell cycle. mTOR is a serine/threonine kinase which plays a role in the PI3K/AKT pathway that is upregulated in some tumors.

Indikationen/Anwendungsmöglichkeiten gemäss Compendium®:

Torisel ist angezeigt zur «first-line» Behandlung des fortgeschrittenen Nierenzell-Karzinoms (RCC) bei Patienten, die mindestens drei von sechs prognostisch ungünstigen Risikofaktoren aufweisen:

- Weniger als ein Jahr von der ersten RCC-Diagnose bis zum Behandlungsbeginn.
- Karnofsky-Performance-Status von 60 oder 70.

- Hämoglobin weniger als untere Grenze des Normwertes.
- Korrigierter Kalziumwert von mehr als 10 mg/dl.
- Laktatdehydrogenase mehr als das 1.5-Fache der oberen Grenze des Normwertes.
- Mehr als ein von Metastasen befallenes Organ.

Link zur Fachinformation des **Compendium®**

Link to Drug Information Portal, a service of the U.S. National Library of Medicine, National Institutes of Health
Link to MedlinePlus, a service of the U.S. National Library of Medicine, National Institutes of Health
Link to National Cancer Institute
Link zu Wiki
Link zu PharmaWiki
Link to Physicians Desk Reference (PDR)
Link to European Medicines Agency (EMEA)

Info for Patients presented by Scott Hamilton from Chemocare.com
mTOR Signaling Pathway and mTOR Inhibitors in Cancer Therapy

mTOR-Inhibitor

Teniposide

According to the NCI website teniposide is a semisynthetic derivative of podophyllotoxin with antineoplastic activity. Teniposide forms a ternary complex with the enzyme topoisomerase II and DNA, resulting in dose-dependent single- and double-stranded breaks in DNA, DNA: protein cross-links, inhibition of DNA strand religation, and cytotoxicity. This agent acts in the late S or early G phase of the cell cycle.

Indikationen/Anwendungsmöglichkeiten gemäss Medline Plus:
This medication is used to treat:
childhood acute lymphocytic leukemia
This medication is sometimes prescribed for other uses; ask your doctor or pharmacist for more information.

Link to Drug Information Portal, a service of the U.S. National Library of Medicine, National Institutes of Health
Link to MedlinePlus, a service of the U.S. National Library of Medicine, National Institutes of Health
Link to National Cancer Institute
Link zu Wiki
Link to Physicians Desk Reference (PDR)
Info for Patients presented by Scott Hamilton from Chemocare.com

Topoisomerase II Inhibitor

Tepotinib

According to the NCI website, the c-Met inhibitor MSC2156119J (Tepotinib) is an orally bioavailable inhibitor of the proto-oncogene c-Met (also known as hepatocyte growth factor receptor (HGFR)) with potential antineoplastic activity. c-Met inhibitor MSC2156119J selectively binds to c-Met, which inhibits c-Met phosphorylation and disrupts c-Met-mediated signal transduction pathways. This may induce cell death in tumor cells overexpressing c-Met protein or expressing constitutively activated c-Met protein. c-Met, a receptor tyrosine kinase overexpressed or mutated in many tumor cell types, plays key roles in tumor cell proliferation, survival, invasion, metastasis, and tumor angiogenesis. Check for active clinical trials using this agent. (NCI Thesaurus)

Link to Drug Information Portal, a service of the U.S. National Library of Medicine, National Institutes of Health

Wiki

Link to European Medicines Agency (EMEA)

Thalidomid - THALIDOMID Celgene (EMEA zugelassen)

Thioguanin - LANVIS®

According to the NCI website, thioguanine is a synthetic guanosine analogue antimetabolite. Phosphorylated by hypoxanthine-guanine phosphoribosyltransferase, thioguanine incorporates into DNA and RNA, resulting in inhibition of DNA and RNA syntheses and cell death. This agent also inhibits glutamine-5-phosphoribosylpyrophosphate amidotransferase, thereby inhibiting purine synthesis. Check for active clinical trials using this agent. (NCI Thesaurus)

Indikationen/Anwendungsmöglichkeiten gemäss Compendium®

- *Akute myeloische Leukämie.*
- Lanvis kann auch zur Behandlung der akuten lymphatischen Leukämie angewendet werden.

Link zur Fachinformation von Compendium.ch®:

Merkblätter für Patientinnen und Patienten

More Information in English:

Link to Drug Information Portal, a service of the U.S. National Library of Medicine, National Institutes of Health

Link to MedlinePlus, a service of the U.S. National Library of Medicine, National Institutes of Health
Link to National Cancer Institute

Wiki

Link zu PharmaWiki

Info for Patients presented by Scott Hamilton from Chemocare.com

Thiotepa - TEPADINA®

According to the NCI website thiotepa is a synthetic alkylating agent. Related to nitrogen mustard, thiotepa alkylates and crosslinks DNA, resulting in the inhibition of DNA replication.

Indikationen/Anwendungsmöglichkeiten gemäss Compendium®:

TEPADINA® wird in Kombination mit anderen Chemotherapeutika angewendet:

- mit oder ohne Ganzkörperbestrahlung (GKB) zur Konditionierung vor allogener oder autologer hämatopoetischer Stammzelltransplantation (HSZT) für die Behandlung von hämatologischen Erkrankungen bei Erwachsenen und Kindern;
- wenn eine hochdosierte Chemotherapie mit anschliessender HSZT zur Behandlung von soliden Tumoren bei Erwachsenen und Kindern angezeigt ist.

Arzneimittelinformationen gemäss Compendium®

Link to Drug Information Portal, a service of the U.S. National Library of Medicine, National Institutes of Health
Link to MedlinePlus, a service of the U.S. National Library of Medicine, National Institutes of Health
Link to National Cancer Institute
Link zu Wiki
Link to European Medicines Agency (EMEA)
Info for Patients presented by Scott Hamilton from Chemocare.com

Alkylating Agents

Tipifarnib

According to the NCI website, Tipifarnib is a nonpeptidomimetic quinolinone with potential antineoplastic activity. Tipifarnib binds to and inhibits the enzyme farnesyl protein transferase, an enzyme involved in protein processing (farnesylation) for signal transduction. By inhibiting the farnesylation of proteins, this agent prevents the activation of Ras oncogenes, inhibits cell growth, induces apoptosis, and inhibits angiogenesis. Check for active clinical trials using this agent. (NCI Thesaurus)

More Information in English:

Link to Drug Information Portal, a service of the U.S. National Library of Medicine, National Institutes of Health
Link to National Cancer Institute

Wiki
Link to European Medicines Agency (EMEA)

Tirabrutinib

According to the NCI website, Tirabrutinib is an orally available formulation containing an inhibitor of Bruton agammaglobulinemia tyrosine kinase (BTK), with potential antineoplastic activity. Upon administration, tirabrutinib covalently binds to BTK within B cells, thereby preventing B-cell receptor signaling and impeding B-cell development. As a result, this agent may inhibit the proliferation of B-cell malignancies. BTK, a cytoplasmic tyrosine kinase and member of the Tec family of kinases, plays an important role in B lymphocyte development, activation, signaling, proliferation and survival. Check for active clinical trials using this agent. (NCI Thesaurus)

More Information in English:

Link to Drug Information Portal, a service of the U.S. National Library of Medicine, National Institutes of Health
Link to National Cancer Institute

Tiragolumab

Tiragolumab is a novel cancer immunotherapy designed to bind to TIGIT, an immune checkpoint protein expressed on immune cells. Both TIGIT and PD-L1 play an important role in immune suppression, and blocking both pathways could enhance anti-tumour activity.

More Information in English:

Link to Drug Information Portal, a service of the U.S. National Library of Medicine, National Institutes of Health

Tisagenlecleucel – KYMRIAH®

According to the NCI website, tisagenlecleucel stands for Autologous T lymphocytes transduced with a modified lentiviral vector expressing a chimeric antigen receptor (CAR) consisting of an anti-CD19 scFv (single chain variable fragment) and the zeta chain of the TCR/CD3 complex (CD3-zeta), coupled to the signaling domain of 4-1BB (CD137), with potential immunomodulating and antineoplastic activities. Upon transfusion, tisagenlecleucel direct the T lymphocytes to CD19-expressing tumor cells, thereby inducing a selective toxicity in CD19-expressing tumor cells. The 4-1BB co-stimulatory molecule signaling domain enhances activation and signaling after recognition of CD19 and the inclusion of this signaling domain may increase the antitumor activity compared to the inclusion of the CD3-zeta chain alone. CD19 antigen is a B-cell specific cell surface antigen expressed in all B-cell lineage malignancies. CD3-zeta (or CD247) is a transmembrane signaling adaptor polypeptide that regulates the assembly of complete TCR complexes and their expression on the cell surface. Check for active clinical trials using this agent. (NCI Thesaurus)

Indikationen/Anwendungsmöglichkeiten gemäss Compendium®

Kymriah ist eine gegen CD19 gerichtete autologe Immunzell-Therapie für folgende Indikationen:

- Die Behandlung von pädiatrischen und jungen erwachsenen Patienten im Alter bis zu 25 Jahren mit akuter lymphatischer B-Zell-Leukämie (B-Zell-ALL), die refraktär ist, nach einer Transplantation rezidiviert ist oder nach zwei Therapielinien oder später rezidiviert ist.
- Die Behandlung erwachsener Patienten mit rezidiviertem oder refraktärem diffus grosszelligem B-Zell-Lymphom (DLBCL) nach zwei oder mehr Linien einer systemischen Therapie.

Link zur Fachinformation von Compendium.ch®

Link zur Patienteninfo von Compndium®

More Information in English:

Link to Drug Information Portal, a service of the U.S. National Library of Medicine, National Institutes of Health

Link to MedlinePlus, a service of the U.S. National Library of Medicine, National Institutes of Health
Link to National Cancer Institute

Wiki

Link zu PharmaWiki
Link to Physicians Desk Reference (PDR)
Link to European Medicines Agency (EMEA)
Info for Patients presented by Scott Hamilton from Chemocare.com

Tislelizumab

According to the NCI website, tislelizumab (anti-PD-1 monoclonal antibody BGB-A317) is a monoclonal antibody directed against the negative immunoregulatory human cell surface receptor programmed cell death 1 (PD-1), with potential immune checkpoint inhibitory and antineoplastic activities. Upon administration, tislelizumab binds to PD-1 and inhibits the binding of PD-1 to the PD-1 ligands programmed cell death-1 ligand 1 (PD-L1), and PD-1 ligand 2 (PD-L2). This prevents the activation of PD-1 and its downstream signaling pathways. This may restore immune function through the activation of both T cells and T-cell-mediated immune responses against tumor cells. PD-1, a transmembrane protein in the immunoglobulin (Ig) superfamily expressed on activated T cells, negatively regulates T-cell activation and effector function when activated by its ligands; it plays an important role in tumor evasion from host immunity. Check for active clinical trials using this agent. (NCI Thesaurus)

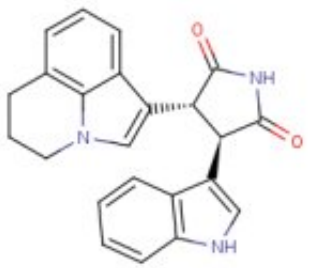
Tislelizumab is being studied in more than 25 trials worldwide.They include a Phase III pitting the drug against docetaxel in second-line or third-line NSCLC, expected by early 2021, in addition to trials in hepatocellular carcinoma and esophageal cancer.

More Information in English:

Link to Drug Information Portal, a service of the U.S. National Library of Medicine, National Institutes of Health
Link to National Cancer Institute

Wiki

Tivantinib



According to the NCI website, tivantinib is an orally bioavailable small molecule inhibitor of c-Met with potential antineoplastic activity. Tivantinib binds to the c-Met protein and disrupts c-Met signal transduction pathways, which may induce cell death in tumor cells overexpressing c-Met protein or expressing consitutively activated c-Met protein.

Link to Drug Information Portal, a service of the U.S. National Library of Medicine, National Institutes of Health
Link to National Cancer Institute

Wiki
Link to European Medicines Agency (EMEA)

C-MET Inhibitor

Tivozanib - FOTIVDA (EMEA)

According to the NCI website tivozanib is an orally bioavailable inhibitor of vascular endothelial growth factor receptors (VEGFRs) 1, 2 and 3 with potential antiangiogenic and antineoplastic activities. Tivozanib

binds to and inhibits VEGFRs 1, 2 and 3, which may result in the inhibition of endothelial cell migration and proliferation, inhibition of tumor angiogenesis and tumor cell death.

EMEA (EPAR was last updated on 28/11/2019)

- Fotivda is a medicine for treating adults with advanced renal cell carcinoma (a kidney cancer).
- Fotivda may be used in previously untreated patients or in those whose disease has got worse despite treatment with another medicine working in a different way.

Link to European Medicines Agency (EMEA)

Link to Drug Information Portal, a service of the U.S. National Library of Medicine, National Institutes of Health
Link to National Cancer Institute
Link zu Wiki

VEGF Receptor

Topotecan - HYCAMTIN®

Topotecan - Hycamtin® ist das Hydrochloridsalz eines semisynthetischen Derivats von Camptothecin mit antineoplastischer Aktivität. Während der S-Phase des Zellzyklus stabilisiert Topotecan selektiv die Topoisomerase-I-DNA-kovalenten Komplexe. Damit inhibiert es die Religation von Topoisomerase vermittelten einsträngigen DNA-Brüchen und produziert potentiell tödliche Doppelstrang-DNA-Brüche-I, sobald diese Komplexe durch die DNA-Replikationsmaschinerie angetroffen werden. Camptothecin ist ein zytotoxisches Chinolin-basierts Alkaloid, das aus dem asiatischen Baum Camptotheca acuminata extrahiert wird.

Indikationen/Anwendungsmöglichkeiten gemäss Compendium®:

Intravenös:

- Second-Line Therapie des kleinzelligen Bronchialkarzinoms bei Versagen oder Rezidiv nach primärer Chemotherapie mit einem aktuell etablierten Schema.
- Behandlung des metastasierenden Ovarialkarzinoms nach fehlendem Erfolg der Primär- oder Folgetherapie.
- Behandlung in Kombination mit Cisplatin von Patientinnen mit histologisch bestätigtem, rezidivierendem, persistentem oder Stadium IV-B Zervixkarzinom, wenn eine Behandlung mittels Operation und/oder Strahlentherapie nicht in Frage kommt.

Oral:

- Hycamtin-Kapseln können zur palliativen Therapie bei rezidiviertem kleinzelligem Bronchialkarzinom mit extensive disease angewendet werden, wenn eine nochmalige i.v. Chemotherapie nicht angezeigt ist.

Merkblatt für Patientinnen und Patienten

Link zur Fachinformation des Compendium®:

Medikamenteninformation: Für den Arzt Patienteninformation

Information des Médicaments: Info prof. Info patient

Informazione sul medicamento: info per il paziente

More information in English:

Link to Drug Information Portal
Link to National Cancer Institute
Link zu Wiki
Link zu PharmaWiki
Link to Physicians Desk Reference (PDR)
Link to European Medicines Agency (EMEA)

More information fpr patients:
Link to MedlinePlus, a service of the U.S. National Library of Medicine, National Institutes of Health
Info for Patients presented by Scott Hamilton from Chemocare.com

Topoisomerase II Inhibitor

Toremifene

Fareston® 60 mg, According to the NCI website Toremifene is Chemically related to tamoxifen, toremifene is a selective estrogen receptor modulator (SERM). This agent binds competitively to estrogen receptors, thereby interfering with estrogen activity.

Indikationen/Anwendungsmöglichkeiten gemäss Arzneimittel-Kompendium der Schweiz®:

Behandlung des lokalen inoperablen, lokal rezidivierenden oder metastasierenden Mammakarzinoms nach der Menopause.

Link to MedlinePlus, a service of the U.S. National Library of Medicine, National Institutes of Health
Link to National Cancer Institute
Link zu Wiki
Link zu PharmaWiki

Link to Physicians Desk Reference (PDR)
Link to European Medicines Agency (EMEA)

Toremifen ist in Form von Tabletten im Handel (Fareston®). Es wurde in der Schweiz 1996 zugelassen und ging im Jahr 2012 ausser Handel.

Info for Patients presented by Scott Hamilton from Chemocare.com

SERM

Tositumomab

According to the NCI website tositumomab A murine IgG2 monoclonal antibody directed against the CD20 antigen, found on the surface of B-cells. Tositumomab binds to the CD20 surface membrane antigen, resulting in apoptosis, and may stimulate antitumoral cell-mediated and/or antibody-dependent cytotoxicity.

Indikationen/Anwendungsmöglichkeiten gemäss MedlinePlus:
Tositumomab injection is used to treat non-Hodgkin's lymphoma (cancer that begins in the cells of the immune system) that has not improved or that had improved after treatment with other medications, but later returned. Tositumomab injection is in a class of medications called monoclonal antibodies with radioisotopes. It works by attaching to cancer cells and releasing radiation to damage the cancer cells.

Link to Drug Information Portal, a service of the U.S. National Library of Medicine, National Institutes of Health
Link to MedlinePlus, a service of the U.S. National Library of Medicine, National Institutes of Health
Link to National Cancer Institute
Link to National Cancer Institute (Iodine I 131 tositumomab)
Link zu Wiki
Link to Physicians Desk Reference (PDR)
Link to European Medicines Agency (EMEA)
Info for Patients presented by Scott Hamilton from Chemocare.com

Monoclonal Antibodies

Trabectedin - Yondelis®

According to the NCI website, Trabectedin is a tetrahydroisoquinoline alkaloid isolated from the marine tunicate Ecteinascidia turbinate with potential antineoplastic activity. Binding to the minor groove of DNA, trabectedin inteferes with the transcription-coupled nucleotide excision repair machinery to induce lethal DNA strand breaks.and blocks the cell cycle in the G2 phase. Check for active clinical trials using this agent. (NCI Thesaurus)

Patient information

Indikationen/Anwendungsmöglichkeiten gemäss Fachinformation Swissmedic:

- Behandlung von Patienten mit Liposarkom und Leiomyosarkom nach Versagen oder Intoleranz von Anthrazyklinen und Ifosfamid.

Link zur Fachinformation von SWISSMEDIC

More Information in English:

Link to Drug Information Portal, a service of the U.S. National Library of Medicine, National Institutes of Health

Link to MedlinePlus, a service of the U.S. National Library of Medicine, National Institutes of Health
Link to National Cancer Institute

Wiki

Link zu PharmaWiki
Link to Physicians Desk Reference (PDR)
Link to European Medicines Agency (EMEA)

Info for Patients presented by Scott Hamilton from Chemocare.com

Trametinib - MEKINIST®

Trametinib - Mekinist® ist ein oral bioverfügbarer Inhibitor der MAP-Kinase-Kinase (MEK MAPK/ERK-Kinase) mit einer potentiellen antineoplastischen Aktivität. Trametinib bindet spezifisch und hemmt MEK 1 und 2, was zu einer Hemmung der Wachstumsfaktor-vermittelten Zellsignalisierung und Zellproliferation in verschiedenen Krebsarten führt. MEK 1 und 2 - Threonin/Tyrosin-Kinasen von dualer Spezifität - sind häufig in verschiedenen Krebs-Zelltypen heraufreguliert und spielen eine Schlüsselrolle bei der Aktivierung des RAS/RAF/MEK/ERK-Signalweges, der das Zellwachstum reguliert.

Indikationen/Anwendungsmöglichkeiten gemäss Compendium®:

Nicht resezierbares oder metastasiertes Melanom

- Mekinist in Kombination mit Dabrafenib ist angezeigt zur Behandlung von erwachsenen Patienten mit nicht resezierbarem oder metastasiertem Melanom mit einer BRAF-V600-Mutation (V600E/K).

Adjuvante Behandlung des Melanoms

- Mekinist in Kombination mit Dabrafenib ist angezeigt zur adjuvanten Behandlung von Patienten mit Melanom im Stadium III mit einer BRAF-V600-Mutation nach vollständiger Resektion.

Fortgeschrittenes oder metastasiertes, nicht-kleinzelliges Lungenkarzinom

- Mekinist in Kombination mit Dabrafenib ist angezeigt zur Behandlung von Patienten mit fortgeschrittenem oder metastasiertem, nicht-kleinzelligem Lungenkarzinom (NSCLC; non-small cell lung cancer) mit einer BRAF-V600E Mutation nach einer vorausgegangenen Chemotherapie.

Link zur Fachinformation des Compendium®:

Medikamenteniformation: Für den Arzt Patienteninformation

Information des Médicaments: Info prof. Info patient

Informazione sul medicamento: info per il paziente

Merkblatt für Patientinnen und Patienten

More information in English:

Link to Drug Information Portal, a service of the U.S. National Library of Medicine, National Institutes of Health

Link to National Cancer Institute

Link zu Wiki

Link zu PharmaWiki

Link to Physicians Desk Reference (PDR)

Link to European Medicines Agency (EMEA)

More information for patients:

Link to MedlinePlus, a service of the U.S. National Library of Medicine, National Institutes of Health
Info for Patients presented by Scott Hamilton from Chemocare.com

MAP-Kinase-Weg

Trastuzumab - HERCEPTIN®

According to the NCI website, trastuzumab is a drug used to treat breast cancer that is HER2-positive (expresses the human epidermal growth factor receptor 2). It is also used with other drugs to treat HER2-positive stomach cancer that has not already been treated and has spread to other parts of the body. It is being studied in the treatment of other types of cancer. Trastuzumab binds to HER2 on the surface of HER2-positive cancer cells and may kill them. It is a type of monoclonal antibody. Also called Herceptin.

Indikationen/Anwendungsmöglichkeiten gemäss Compendium®:

Mammakarzinom

- Die Überexpression von HER2 muss vor Beginn einer Herceptin-Behandlung im Tumorgewebe des Patienten immunohistochemisch mit 3+ oder molekularbiologisch (Bestimmung einer HER2-Genamplifikation mittels Fluoreszenz-in-situ-Hybridisierung [FISH] oder chromogener In-situ-Hybridisierung [CISH]) nachgewiesen worden sein.

Metastasiertes Mammakarzinom

Herceptin ist zur Behandlung von Patienten mit metastasiertem Mammakarzinom indiziert, wenn die Tumoren HER2 überexprimieren:

- a) als Monotherapeutikum zur Behandlung von Patienten, die bereits eine oder mehrere Chemotherapien gegen ihre metastasierte Erkrankung erhalten haben,
- b) in Kombination mit Paclitaxel oder Docetaxel zur Behandlung von Patienten, die noch keine Chemotherapie gegen ihre metastasierte Erkrankung erhalten haben.
- c) in Kombination mit einem Aromatasehemmer zur Behandlung von postmenopausalen Patienten mit Hormonrezeptor-positivem metastasiertem Mammakarzinom, die noch keine Chemotherapie gegen ihre metastasierte Erkrankung erhalten haben.

Über Patienten mit Mammakarzinom, die im Frühstadium Herceptin als adjuvante Behandlung erhalten haben, liegen keine Daten vor.

Mammakarzinom im Frühstadium

- – Herceptin ist indiziert für die Behandlung von Patienten mit HER2-positivem Mammakarzinom im Frühstadium;
- – im Anschluss an eine Operation, eine (neoadjuvante oder adjuvante) Chemotherapie und (falls anwendbar) eine Strahlentherapie;
- – im Anschluss an eine adjuvante Chemotherapie mit Doxorubicin und Cyclophosphamid, in Kombination mit Paclitaxel oder Docetaxel;
- – in Kombination mit einer adjuvanten Chemotherapie bestehend aus Docetaxel und Carboplatin;
- – in Kombination mit einer neoadjuvanten Chemotherapie gefolgt von adjuvantem Herceptin bei lokal fortgeschrittenem (einschliesslich entzündlichem) Mammakarzinom oder Tumoren mit einem Durchmesser >2 cm.

Metastasiertes Magenkarzinom oder Karzinom des gastroösophagealen Übergangs

- Herceptin in Kombination mit Capecitabine oder intravenösem 5-Fluorouracil und Cisplatin ist indiziert für die Behandlung von Patienten mit HER2-positivem metastasierendem Adenokarzinom des Magens oder des gastroösophagealen Übergangs, welche keine Chemotherapie im Rahmen der metastatischen Erkrankung erhalten haben. Herceptin sollte nur bei Patienten mit metastasierendem Magenkarzinom, deren Tumoren HER2 überexprimieren, definiert durch IHC2+ und bestätigt durch ein positives FISH+- oder Silber-in-situ-Hybridisierungsergebnis (SISH), oder IHC3+ bestimmt durch einen validierten Test, angewendet werden.

Link zur Fachinformation des **Compendium®**

Link to Drug Information Portal, a service of the U.S. National Library of Medicine, National Institutes of Health
Link to MedlinePlus, a service of the U.S. National Library of Medicine, National Institutes of Health

Link to National Cancer Institute
Link to Wikipedia
Monoclonal antibodies for tumors
Link zu PharmaWiki

Link to Physicians Desk Reference (PDR)
Info for Patients presented by Scott Hamilton from Chemocare.com

Trastuzumab-DM1: **Link to Wikipedia**

Monoclonal Antibodies

Trastuzumab Deruxtecan – ENHERTU® (USA)

According to the NCI website, fam-trastuzumab deruxtecan-nxki is an antibody-drug conjugate (ADC) composed of trastuzumab, a monoclonal antibody targeting human epidermal growth factor receptor 2 (ERBB2; EGFR2; HER2) conjugated to deruxtecan, a derivative of the camptothecin analog exatecan (DXd; DX-8951 derivative), a DNA topoisomerase 1 (topoisomerase I; Top1) inhibitor, with antineoplastic activity. Upon administration of trastuzumab deruxtecan, trastuzumab targets and binds to HER2 on tumor cells. Upon antibody/antigen binding and internalization, fam-trastuzumab deruxtecan-nxki binds to and inhibits Top1-DNA complexes, which results in an inhibition of DNA replication, cell cycle arrest and tumor cell apoptosis. HER2, a tyrosine kinase receptor, is overexpressed by many cancer cell types. Check for active clinical trials using this agent. (NCI Thesaurus)

Indikation gemäss NCI webite:

- **Breast cancer**that is HER2 positive and cannot be removed by surgery or has metastasized (spread to other parts of the body). It is used in adults who have already received at least two anti-HER2 treatments for metastatic disease.

This use is approved under FDA's Accelerated Approval Program. As a condition of approval, a confirmatory trial(s) must show that fam-trastuzumab deruxtecan-nxki provides a clinical benefit in these patients.

More Information in English:

Link to Drug Information Portal, a service of the U.S. National Library of Medicine, National

Institutes of Health

Link to MedlinePlus, a service of the U.S. National Library of Medicine, National Institutes of Health
Link to National Cancer Institute

Wiki
Info for Patients presented by Scott Hamilton from Chemocare.com

Trastuzumab Emtasine – KADCYLA®

According to the NCI website, ado trastuzumab emtansine is an antibody-drug conjugate (ADC) consisting of the recombinant anti-epidermal growth factor receptor 2 (HER2) monoclonal antibody trastuzumab conjugated to the maytansinoid DM1 via a nonreducible thioether linkage (MCC) with potential antineoplastic activity. The trastuzumab moiety of this ADC binds to HER2 on tumor cell surface surfaces; upon internalization, the DM1 moiety is released and binds to tubulin, thereby disrupting microtubule assembly/disassembly dynamics and inhibiting cell division and the proliferation of cancer cells that overexpress HER2. Linkage of antibody and drug through a nonreducible linker has been reported to contribute to the improved efficacy and reduced toxicity of this ADC compared to similar ADCs constructed with reducible linkers. Check for active clinical trials using this agent. (NCI Thesaurus)

Indikationen/Anwendungsmöglichkeiten gemäss Compendium®

Metastasierter Brustkrebs (Metastatic Breast Cancer, MBC)

- Kadcyla ist als Monotherapie für die Behandlung von Patienten mit HER2-positivem, inoperablem, lokal fortgeschrittenem oder metastasiertem Brustkrebs indiziert, die mit Trastuzumab und einem Taxan vorbehandelt sind.

Brustkrebs im Frühstadium (Early Breast Cancer, EBC)

- Kadcyla ist als Monotherapie für die adjuvante Behandlung von Patienten mit HER2-positivem Brustkrebs im Frühstadium indiziert, die nach präoperativer taxan-haltiger Chemotherapie in Kombination mit mindestens Trastuzumab als HER2 gerichtete Therapie eine Resterkrankung in der Brust und/oder den Lymphknoten aufweisen.

Link zur Fachinformation von Compendium.ch®:

More Information in English:

Link to Drug Information Portal, a service of the U.S. National Library of Medicine, National Institutes of Health

Link to MedlinePlus, a service of the U.S. National Library of Medicine, National Institutes of Health
Link to National Cancer Institute

Wiki

Link zu PharmaWiki
Link to Physicians Desk Reference (PDR)
Link to European Medicines Agency (EMEA)
Info for Patients presented by Scott Hamilton from Chemocare.com

Tremelimumab

According to the NCI website, Tremelimumab is a human immunoglobulin (Ig) G2 monoclonal antibody directed against the human T-cell receptor protein cytotoxic T-lymphocyte-associated protein 4 (CTLA4), with potential immune checkpoint inhibitory and antineoplastic activities. Tremelimumab binds to CTLA4 on activated T-lymphocytes and blocks the binding of the antigen-presenting cell ligands B7-1 (CD80) and B7-2 (CD86) to CTLA4, resulting in inhibition of CTLA4-mediated downregulation of T-cell activation. This promotes the interaction of B7-1 and B7-2 with another T-cell surface receptor protein CD28, and results in a B7-CD28-mediated T-cell activation that is unopposed by CTLA4-mediated inhibition. This leads to a cytotoxic T-lymphocyte (CTL)-mediated immune response against cancer cells. CTLA4, an inhibitory receptor and member of the immunoglobulin superfamily, plays a key role in the downregulation of the immune system. Check for active clinical trials using this agent. (NCI Thesaurus)

More Information in English:

Link to Drug Information Portal, a service of the U.S. National Library of Medicine, National Institutes of Health

Link to MedlinePlus, a service of the U.S. National Library of Medicine, National Institutes of Health
Link to National Cancer Institute

Wiki
Link to European Medicines Agency (EMEA)

Trifluridin/Tipiracil - LONSURF®

Trifluridin/Tipiracil - Lonsurf® ist **e**in oral bioverfügbares Kombinationsmittel, bestehend aus dem zytotoxischen Pyrimidinanalog Trifluridin (5-Trifluor-2'-deoxythymidin oder TFT) und einem Thymidinphosphorylase-Inhibitor (TPI) Tipiracil-Hydrochlorid, in einem Molverhältnis von 1,0: 0,5 (TFT: TPI), mit potentielle antineoplastische Aktivität. Nach oraler Verabreichung von Trifluridin und Tipiracilhydrochlorid wird TFT zu der aktiven Monophosphatform TF-TMP phosphoryliert, die kovalent an die aktive Stelle der Thymidylatsynthase bindet, wodurch die für die DNA-Replikation erforderlichen Nukleotidpoolspiegel reduziert werden. Darüber hinaus kann die Triphosphatform TF-TTP in die DNA eingebaut werden, die DNA-Fragmentierung induziert und zur Hemmung des Tumorwachstums führt. TPI zeigt eine doppelte Wirkung: 1) einen antiangiogenen Effekt, der durch die Inhibierung von Thymidinphosphorylase vermittelt wird, die eine wichtige Rolle im Nukleotidstoffwechsel und einer Vielzahl von Entwicklungsprozessen einschließlich Angiogenese spielt, 2) erhöhte Bioverfügbarkeit des normalerweise kurzlebigen Antimetaboliten TFT durch Verhinderung seines Abbaus in die inaktive Form Trifluorthymin (TF-Thy). Die synergistische Wirkung der Komponenten in TAS-10 kann eine Antitumoraktivität in 5-FU-resistenten Krebszellen zeigen.

Indikationen/Anwendungsmöglichkeiten gemäss Compendium®:

- **Lonsurf®** ist indiziert zur Behandlung erwachsener Patienten mit metastasiertem kolorektalem Karzinom (mKRK), die bereits mit verfügbaren Therapien behandelt wurden. Zu diesen Therapien zählen Fluoropyrimidin-, Oxaliplatin- und Irinotecan-basierte Chemotherapien, Anti-VEGF-Therapien und, bei Patienten mit nicht mutiertem KRAS-Status (Wildtyp), Anti-EGFR-Therapien.

Link zur Fachinformation des Compendium®:

Medikamenteniformation: Für den Arzt Patienteninformation

Information des Médicaments: Info prof. Info patient

Informazione sul medicamento: info per il paziente

Merkblatt für Patientinnen und Patienten

More information in English:

Link to Drug Information Portal, a service of the U.S. National Library of Medicine, National Institutes of Health

Link to National Cancer Institute

Link zu Wiki

Link zu PharmaWiki

Link to Physicians Desk Reference (PDR)

Link to European Medicines Agency (EMEA)

More information for patients:

Link to MedlinePlus, a service of the U.S. National Library of Medicine, National Institutes of Health
Info for Patients presented by Scott Hamilton from Chemocare.com

Triptorelin / Decapeptyl® Retard, Pamorelin® LA 11,25 mg

According to the NCI website Triptorelin is a synthetic decapeptide agonist analog of luteinizing hormone releasing hormone (LHRH). Possessing greater potency than endogenous LHRH, triptorelin reversibly represses gonadotropin secretion. After chronic, continuous administration, this agent effects sustained decreases in LH and FSH production and testicular and ovarian

steroidogenesis. Serum testosterone concentrations may fall to levels typically observed in surgically castrated men.

Indikationen/Anwendungsmöglichkeiten gemäss Arzneimittel-Kompendium der Schweiz®:

Symptomatische Therapie des fortgeschrittenen hormonabhängigen Prostatakarzinoms.

Link to Drug Information Portal
Link to MedlinePlus, a service of the U.S. National Library of Medicine, National Institutes of Health
Link to National Cancer Institute
Link zu Wiki
Link zu PharmaWiki
Link to Physicians Desk Reference (PDR)
Link zur Fachinformation des Arzneimittel-Kompendium der Schweiz
Info for Patients presented by Scott Hamilton from Chemocare.com

Tucatinib - TUKYSA®

According to the NCI website Tucatinib is an orally bioavailable inhibitor of the human epidermal growth factor receptor tyrosine kinase ErbB-2 (also called HER2) with potential antineoplastic activity. Tucatinib selectively binds to and inhibits the phosphorylation of ErbB-2, which may prevent the activation of ErbB-2 signal transduction pathways, resulting in growth inhibition and death of ErbB-2-expressing tumor cells. ErbB-2 is overexpressed in a variety of cancers and plays an important role in cellular proliferation and differentiation.

Indikation gemäss Compendium.ch®

TUKYSA in Kombination mit Trastuzumab und Capecitabin ist indiziert zur Behandlung von Patienten mit metastasiertem HER2-positivem Brustkrebs, die zuvor zwei oder mehr anti-HER2-Therapieregime in einem beliebigen Setting, einschliesslich Trastuzumab, Pertuzumab und Trastuzumab-Emtansin (T-DM1), erhalten haben (siehe «Klinische Wirksamkeit»).

Link zur Fachinformatio im Compendium.ch®

SABCS December 2019 Study presentation with Tucatinib

Tucatinib FDA Approval Status - Drugs.com

Today, April 17, 2020, as part of Project Orbis, the U.S. Food and Drug Administration approved Tukysa (tucatinib) in combination with chemotherapy (trastuzumab and capecitabine) for the treatment of adult patients with advanced forms of HER2-positive breast cancer that can't be removed with surgery, or has spread to other parts of the body, including the brain, and who have received one or more prior treatments.

More Information in English:

Link to Drug Information Portal, a service of the U.S. National Library of Medicine, National Institutes of Health
Link to National Cancer Institute
Link zu Wiki
Link to European Medicines Agency (EMEA)