



Belzutifan (Welireg®)

- Names** The generic drug name is belzutifan (bell-ZOO-ti-fan). The brand name is Welireg®. There may be other names for this medication.
- Why am I Taking This Medication?** The Food & Drug Administration (FDA) approved this medication to treat adult patients with VHL* disease who need treatment for require therapy for renal cell carcinoma (RCC), the most common type of kidney cancer. It is also approved to treat adults with VHL who have pancreatic neuroendocrine tumors, or central nervous system hemangioblastomas.
- *Von-Hippel Lindau (VHL) disease is a hereditary disorder that raises the risk that a person will ge certain cancers, including a type of RCC called clear cell renal cell carcinomas (ccRCC). In a clinical study of 61 people with VHL disease and RCC with at least 1 tumor and no metastatic disease, 49% responded to belzutifan.
- How Does it Work?** People with VHL disease lack a VHL tumor suppressor gene and the protein it produces. This VHL protein, if present, would regulate and prevent the buildup of HIF-2 α , a factor that plays a role in
- cell growth and division (reproduction)
 - angiogenesis (building new blood vessels)
 - tumor growth
- Without the VHL tumor suppression gene and its protein, HIF-2 α factor builds up, and cell and tumor growth continue uncontrolled.
- This medication works by reducing cell and tumor growth.
- How is it Given?**
- Belzutifan comes as 40 milligram (mg) tablets that are taken by mouth.
 - A typical dose is 120 mg, which is three 40 mg tablets, taken once a day - with or without food.
 - Swallow tablets whole. Do NOT crush, chew, or split tablets.
 - If you vomit after taking belzutifan, do not retake the dose. Take the next dose on the next day.
 - If you miss a dose, take it as soon as possible on the same day. Resume your regular daily dose schedule the next day. Do not take extra tablets to make up for missed dose.

Any Precautions Before I Begin?	<p>Before starting this medication, tell your doctor/provider if you:</p> <ul style="list-style-type: none"> • have low red blood cell counts (anemia) • are pregnant or planning to become pregnant • are breastfeeding or plan to breastfeed
<p>What are Some Possible Side Effects?</p> <p>(Listed from most common to less common)</p>	<ul style="list-style-type: none"> • Low red blood cell count/Anemia: Very common; occurs in up to 90% of patients (9 out of 10). Most (82%) were mild to moderate cases of anemia, but it can be severe. If your red blood cell counts drops too low, your medication may be temporarily stopped, and/or you may need a blood transfusion. We will do blood tests to check your counts before you begin treatment and during treatment. Tell your doctor if you have tiredness, shortness of breath, chest pain, fast heartbeat, or if you feel cold. • Fatigue • Headache • Dizziness • Nausea • High blood glucose (sugar) • Shortness of breath/ difficulty breathing (dyspnea), low oxygen (hypoxia) • Joint pain/muscle pain (arthralgia/myalgia) • Constipation • Elevations in ALT (liver enzyme) • High blood pressure (hypertension) • Blurred vision • Infertility, birth defects: Animal studies show this drug may impair fertility.
How Can I Manage These Side Effects?	<ul style="list-style-type: none"> ✓ Drink 2-3 quarts of water every day unless your doctor tells you to limit your fluids. This will help flush the medications out and help prevent dehydration and constipation. Try to drink a variety of fluids to help provide the calories, sodium (salt), and other electrolytes your body needs. Broths are a good source of sodium, and some sports drinks provide additional electrolytes (check the labels). ✓ Low red blood cell count/fatigue: Eat well and stay out of bed as much as possible during your treatment to stay strong. If you feel fatigued, take rest periods throughout the day, and try to limit your activities. ✓ Headache, joint/muscle pain: Check with your doctor before taking any medication or product for these or any other side effect. ✓ Nausea: To help prevent nausea, avoid fried, spicy, and fatty foods on the days you receive chemo and for 2-3 days afterwards. Eating small, frequent meals may help. If you have nausea, try foods and drinks that are ‘easy on the stomach’ - bland foods, ginger ale, dry crackers, and toast. ✓ Keep all your doctor and lab appointments.

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- ✓ **Dyspnea, hypoxia:** We will monitor your oxygen levels before you start treatment and during treatment. Report any signs and symptoms of hypoxia (see When to Call the Doctor)
- ✓ **Constipation:** To help prevent constipation, add high fiber foods such as fruits, vegetables, and whole grains to your diet and, if possible, keep moving throughout the day. If you do not move your bowels in 2-3 days, you will need to take a laxative. A suggested laxative is Senna-S (contains senna plus docusate), which is available over the counter. If not better in 2 days, call the clinic.
- ✓ **High blood pressure:** Check your blood pressure regularly with a home blood pressure monitor or have it checked at your pharmacy. Keep a log of your blood pressure readings and let us know if your blood pressure is unusually high.
- ✓ **Birth defects:** Though chemo may affect fertility, do not assume you cannot get pregnant or father a child when receiving chemo. Both men and women should use effective, nonhormonal, reliable birth control during treatment and for 1 week after their last dose. Barrier methods, such as condoms and diaphragms, are recommended. This drug may be harmful to a fetus.
- ✓ Do not breastfeed while receiving chemotherapy or for 1 week after last dose.
- ✓ If you have questions, talk to your doctor or pharmacist.

When
Should I Call
the Doctor?

Call 911 or go to the nearest hospital emergency department if you have life-threatening symptoms such as:

- signs of severe allergic reaction: Swelling or tingling in your face, tongue, mouth, or throat; chest tightness; wheezing; trouble breathing or swallowing; dizziness, shortness of breath; heart palpitations; or hives.
- signs of heart attack: Chest pain, pain in jaw, neck, back, arm; shortness of breath, sweating; nausea
- signs of stroke: Sudden numbness or weakness – especially if only on one side of the body; sudden trouble walking, seeing, speaking, or maintaining balance or coordination)

Please let us know if you go to the emergency room or are admitted to the hospital.

Call the doctor immediately if you have:

- signs of infection: Fever of **100.4°F (38°C)** or higher, chills, cough, sore throat, pain or burning upon urination; redness or tenderness along a vein, at an IV site, or at any other skin irritation
- signs of low oxygen (hypoxia): shortness of breath, fast heartbeat, restlessness, headache, confusion, fast breathing, high blood pressure (in later stage, blood pressure may be low), pale or bluish skin, anxiety
- unusual bleeding or bruising