

## Pemazyre<sup>™</sup> (pemigatinib) – New orphan drug approval

- On April 17, 2020, the [FDA announced](#) the approval of [Incyte's Pemazyre \(pemigatinib\)](#), for the treatment of adults with previously treated, unresectable locally advanced or metastatic cholangiocarcinoma with a fibroblast growth factor receptor 2 (FGFR2) fusion or other rearrangement as detected by an FDA-approved test.
  - This indication is approved under accelerated approval based on overall response rate and duration of response. Continued approval for this indication may be contingent upon verification and description of clinical benefit in a confirmatory trial(s).
- Cholangiocarcinoma is a rare form of cancer that forms in bile ducts. At diagnosis, a majority of patients with cholangiocarcinoma have advanced disease, meaning that the disease is no longer treatable with surgery.
  - FGFR2 fusions have been found in the tumors of approximately 9% to 14% of patients with cholangiocarcinoma.
- Pemazyre is the first and only FDA-approved treatment for this indication. Pemazyre is a potent, selective, oral kinase inhibitor of FGFR isoforms 1, 2 and 3.
- The efficacy of Pemazyre was established in FIGHT-202, an open-label, single-arm study in 107 patients with locally advanced unresectable or metastatic cholangiocarcinoma whose disease had progressed on or after at least 1 prior therapy and who had an FGFR2 gene fusion or non-fusion rearrangement. The major efficacy outcome measures were overall response rate (ORR) and duration of response (DoR).
  - The ORR was 36% (95% CI: 27, 45).
  - The median DoR was 9.1 months (95% CI: 6.0, 14.5).
- Warnings and precautions for Pemazyre include ocular toxicity, hyperphosphatemia, and embryo-fetal toxicity.
- The most common adverse reactions (≥ 20%) with Pemazyre use were hyperphosphatemia, alopecia, diarrhea, nail toxicity, fatigue, dysgeusia, nausea, constipation, stomatitis, dry eye, dry mouth, decreased appetite, vomiting, arthralgia, abdominal pain, hypophosphatemia, back pain, and dry skin.
- The recommended dose of Pemazyre is 13.5 mg orally once daily for 14 consecutive days followed by 7 days off therapy, in 21-day cycles. Treatment should be continued until disease progression or unacceptable toxicity occurs.
  - Patients should be selected based on the presence of an FGFR2 fusion or rearrangement as detected by an FDA-approved test.
- Incyte plans to launch Pemazyre immediately. Pemazyre will be available as 4.5 mg, 9 mg, and 13.5 mg tablets