Ziihera® (zanidatamab-hrii) – New orphan drug approval

- On November 20, 2024, Jazz Pharmaceuticals announced the FDA approval of Ziihera (zanidatamab-hrii), for the treatment of adults with previously treated, unresectable or metastatic HER2-positive (IHC 3+) biliary tract cancer (BTC), 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).
- Ziihera is a bispecific HER2-directed antibody.
- The efficacy of Ziihera was established in an open-label, single-arm study in 62 patients with HER2-positive (IHC 3+) BTC in Cohort 1 of HERIZON-BTC-01. Patients were required to have unresectable or metastatic disease. Patients received Ziihera every 2 weeks until disease progression or unacceptable toxicity. The major outcome measures were objective response rate (ORR) and duration of response (DOR).
    - The ORR was 52% (95% CI: 39, 65).
    - The median DOR was 14.9 months (95% CI: 7.4, not estimable).
- Ziihera carries a boxed warning for embryo-fetal toxicity.
- Additional warnings and precautions for Ziihera include left ventricular dysfunction, infusion-related reactions, and diarrhea.
- The most common adverse reactions (≥ 20%) with Ziihera use were diarrhea, infusion-related reaction, abdominal pain, and fatigue.
- The recommended dosage of Ziihera is 20 mg/kg, administered as an intravenous infusion once every 2 weeks until disease progression or unacceptable toxicity.
    - Patients should be selected for treatment based on HER2-positive (IHC 3+) tumor specimens, as detected by an FDA-approved test. Information on FDA-approved tests for HER2 protein expression in biliary tract cancers is available at: http://www.fda.gov/CompanionDiagnostics.
- Jazz Pharmaceuticals' launch plans for Ziihera are pending. Ziihera will be available as a 300 mg lyophilized powder in a single-dose vial.