

CAPRELSA (VANDETANIB)
DOSING AND MONITORING
GUIDE FOR PATIENTS AND
PATIENTS' CAREGIVERS
(PAEDIATRIC USE)

For full information, please read the Patient Information Leaflet

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What is Caprelsa and what does it treat?

Caprelsa is a medicine that contains the active substance vandetanib. It is available in film-coated tablets (100 mg and 300 mg). It is used to treat medullary thyroid cancer that is called Rearranged during Transfection (RET) mutant and which cannot be removed by surgery or has spread to other parts of the body.

Caprelsa works by slowing down the growth of new blood vessels in tumours (cancers). This cuts off the supply of food and oxygen to the tumour. Caprelsa may also act directly on cancer cells to kill them or slow down their growth.

How is the dose of Caprelsa calculated?

The calculation of the dose of vandetanib is made by the treating physician, based on the child/adolescent's body surface area (BSA), depending of body height and weight of the patient.

Depending on the calculated BSA, the physician will prescribe to your child a **starting dose**, which can be changed (dose adjustments):

- for an **increased dose**, if vandetanib is well tolerated after 8 weeks at starting dose
- for a reduced dose in case of undesirable side effects, after a suspension of treatment (at least a week)

The dose can also change if the BSA changes during the treatment.

The treatment schedule will correspond to one of the 3 following schemes:

Please note that the dosing scheme can change during treatment. For example, you can follow a daily schedule for the starting dose period and switch to a 7 day schedule after a dose adjustment.

You will have to report each dose taken on a daily tracker table (see below).

How is Caprelsa used?

The prescribed calculated dose should be taken:

- at about the same time
- with or without food.

The total daily dose in children must not exceed 300 mg.

If the child has trouble swallowing the tablet, you can mix it with water as follows:

- Take half a glass of still (non carbonated) water. Only use water, do not use any other liquids.
- Put the tablet into the water.
- Stir the tablet until it has dispersed into the water. This may take about 10 minutes.
- Then make the child drink it straight away.
- To ensure no medicine remains, refill the glass halfway with water and ask your child to finish it.

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[&]quot;daily" schedule (same dose every day)*

[&]quot;every other day" schedule (same dose every other day)*

[&]quot;7 day" schedule (treatment every day but two different doses alternately)*



What are the side effects associated with Vandetanib? Which monitoring is requested?

Your doctor will inform you of the main risks of vandetanib. Please also read carefully the package leaflet for more information about the drug. The most commonly reported side effects with vandetanib are:

- diarrhoea
- rash or other skin reaction
- nausea (feeling sick)
- hypertension (high blood pressure) and headache.

Monitoring of blood and heart will be necessary BEFORE and regularly DURING the treatment by vandetanib, especially:

- blood potassium, calcium, magnesium, and thyroid stimulating hormone (TSH)
- the electrical activity of the heart with a test called an electrocardiogram (ECG)

A good skin protection is requested (wearing clothes, sunscreen), especially if you are sensitive to sun.

Tell your doctor or pharmacist if you are taking, have recently taken or might take any other medicines, including medicines that you buy without a prescription and herbal medicines. These might interact with vandetanib and provoke lack of efficacy or increase side effects.

Report any side effect to your doctor. He/she may prescribe other medicines to help control the patient's side effects. A suspension of treatment and dose reduction may also be necessary.

Tell your doctor straight away if you notice any of the following side effects – you may need urgent medical treatment:

- Fainting, dizziness or heart rhythm changes. These may be signs of a change
 in the electrical activity of the heart. They are seen in 8% of people taking
 Caprelsa for medullary thyroid cancer. Your doctor may recommend you take
 Caprelsa at a lower dose or stop taking Caprelsa. Caprelsa has uncommonly
 been associated with life threatening changes in heart rhythm.
- Severe skin reactions affecting large areas of your body. The signs may
 include redness, pain, ulcers, blisters and shedding of the skin. The lips, nose,
 eyes and genitals may also be affected. These may be common (affecting
 less than 1 in 10 people) or uncommon (affects less than 1 in 100 people)
 depending on the type of skin reaction.
- Severe diarrhoea.
- Serious breathlessness, or sudden worsening breathlessness, possibly with a cough or a high temperature (fever). This may mean that you have an inflammation of the lungs called 'interstitial lung disease'. This is uncommon (affects less than 1 in 100 people) but can be life-threatening.
- Seizures, headache, confusion or finding it difficult to concentrate.
 These may be signs of a condition called RPLS (Reversible Posterior Leukoencephalopathy Syndrome). These usually go away when Caprelsa is stopped. RPLS is uncommon (affects less than 1 in 100 people).



How to use the daily tracker table?

While prescribing the starting dose, your doctor will complete the "prescriber part" of the daily tracker and explain how to use it. The daily tracker is made to help you:

- to remember when to take a new dose and which dose. It has to be completed by you after each dose intake.
- to report side effects and follow dose adjustments.

The daily tracker is **adapted to all dose regimens**. In the event that a dose change is made, a new daily tracker sheet should be provided by your doctor to the patients and/or patient's caregivers.

Please find blank copies of the daily tracker after the examples of completed daily trackers.

GENERAL DAILY TRACKER FOR 14 DAYS

Space reserved prescriber	escriber	Daily tracker for patient	ıt.		
Weight:BSA:BSA:BSA:	ommendations)	Name of patient:	Name of patient:	e: take the missed tab se: skip the missed do the same time) to mal	let as soon as you se.
Day of week	Dose prescribed	Week 1-2 Start:	Week 3-4 Start:	Week 5-6 Start:	Week 7-8 Start:
Monday D1					
Tuesday D2					
Wednesday D3					
Thursday D4					
Friday D5					
Saturday D6					
Sunday D7					

Day of week	Dose prescribed	Week 1-2 Start:	Week 3-4 Start:	Week 5-6 Start:	Week 7-8 Start:
Monday D8					
Tuesday D9					
Wednesday D10					
Thursday D11					
Friday D12					
Saturday D13					
Sunday D14					
oldoliova acad		100 mm of 100 mm	0000 0'+00'+00 v0'\Dag		, to 0, 2, 4, 0, 0, 0, 2, 4, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0,
Doses available		Comments for patient important information)	and/or patient's careg	Comments for patient and/or patient's caregiver (side effects, other freatment, or important information)	r treatment, or
100 mg =					
2 tablets of 100 mg =					
300 mg =	7300				

EXAMPLE OF STARTING DOSE FOR A CHILD WITH BSA FROM 0.7 m² to <0.9 m² ("EVERY OTHER DAY" SCHEDULE : D1 \neq D8)

Space reserved prescriber	rescriber	Daily tracker for patient	ıt.		
Weight:	ommendations)	Name of patient:	Name of patient:	e: take the missed tab se: skip the missed do the same time) to mak	let as soon as you se.
Day of week	Dose prescribed	Week 1-2 Start: 12/09/16	Week 3-4 Start: 26/09/16	Week 5-6 Start: 10/10/16	Week 7-8 Start: 24/10/16
Monday D1	١	0	0	0	0
Tuesday D2	100 mg	fm 001 x 1	pm 001 x 1	fu 001 * 1	bu 001 x 1
Wednesday D3	1	0	0	0	0
Thursday D4	100 mg	fm 001 * 1	/ * 100 mg	fu 001 * 1	bu 001 x 1
Friday D5	1	0	0	0	0
Saturday D6	100 mg	fr 100 mg	1 x 100 mg	f * 100 mg	for 001 x 1
Sunday D7	1	0	0	0	0

Day of week	Dose prescribed	Week 1-2 Start: 12/09/16	Week 3-4 Start: 26/04/16	Week 5-6 Start: 10/10/16	Week 7-8 Start: 24/10/16
Monday D8	bu 001	Bu 001 * 1	Pu 001 x 1	bu 001 x 1	fu 001 x 1
Tuesday D9	١	0	0	0	0
Wednesday D10	Bu 001	Bu 001 * 1	bu 001 x 1	bu 001 x 1	fu 001 * 1
Thursday D11	١	0	0	0	0
Friday D12	100 mg	fr 100 mg	fm 001 x 1	fu 001 x 1	fu 001 x 1
Saturday D13	١	0	0	0	0
Sunday D14	100 mg	f * 100 mg	bu 001 x 1	bu 001 x 1	bu 001 x 1

Doses available 100 mg = 200	Comments for patient a important information)	aide effect side effect sonallakin neaction called doctor, no interruption, neovered using stronger	Comments for patient's caregiver (side effects, other treatment, or important information) side effect safe a stens called doctor, resovered using stronger daily)	well tolerated after 8 week new preservotion with increased dose (00 mg daily)
300 mg =			7	tracker sheet,

EXAMPLE OF INCREASED DOSE FOR A CHILD WITH BSA FROM 0.9m² to <1.2m² ("7 DAYS" SCHEDULE: D1 = D8)

Space reserved prescriber	rescriber	Daily tracker for patient	nt		
Weight: 35 few Height: 125 cm BSA: 1/ m² Date of prescription: 12/04/16 I starting dose If increased dose I reduced dose (see posology recommendations)	ommendations)	Name of patient:	lame of patient:	Name of patient:	let as soon as you se.
Day of week	Dose prescribed	Week 1-2 Start: 12/09/16	Week 3-4 Start: 26/09/16	Week 5-6 Start: 10/10/16	Week 7-8 Start: 24/10/16
Monday D1	bu 001	f * 100 mg	bu 001 x 1	fu 001 x 1	
Tuesday D2	bu oor	g x 100 mg	g x 100 mg	g x 100 mg	
Wednesday D3	100 mg	gn 00/ */	pu 001 x 1	bu 001 x 1	
Thursday D4	soo ma	g x 100 mg	g x 100 mg	2 x 100 mg	
Friday D5	bu 001	bu 001 * 1	pm 001 x 1	suspended	
Saturday D6	200 mg	g x 100 mg	2 x 100 mg	suspended	
Sunday D7	100 mg	bu 001 x 1	fru 001 x 1	suspended	

Day of week	Dose prescribed	Week 1-2 Start: /2/04/16	Week 3-4 Start: 26/09/16	Week 5-6 Start: 10/10/16	Week 7-8 Start: 24/10/16
Monday D8	fm 001	pm 00/ x/	fm 001 x 1	auspended	
Tuesday D9	200 mg	bu 001 x c	Bu 001 x &	auspended	
Wednesday D10	bu 001	for 001 * 1	fu 001 x 1	auspended	
Thursday D11	200 mg	Bu 001 x 2	bu 001 x c	auspended	
Friday D12	bu 001	bu 001 * 1	pm 001 x 1	auspended	
Saturday D13	200 mg	2 x 100 mg	2 x 100 mg	Restart with reduced dose	
Sunday D14	bu 001	for 001 x /	fu 001 x 1		
Doses available		Comments for patient important information)	Comments for patient and/or patient's caregiver (side effects, other treatment, or important information)	giver (side effects, oth	er treatment, or
100 mg =		increased dose after 8 w 100 mg daily tred	tonsillitus; amoxicillin thursday-w	thurday - w s : skin realtion wonsering, treatment	new preserviption starting a reduced dose.
200 mg =		(weakness) ghiday-w/ ; diannhoes	1 4	suspended Iniday - w 6 ; nerwood	new daily tracker sheet
300 mg =	00 8 2	(episode), called docton no charge	oun exposition.	grom skin reaction.	

EXAMPLE OF INCREASED DOSE FOR A CHILD WITH BSA > 1.6 m² ("DAILY" SCHEDULE: D1 = DX)

Space reserved prescriber	escriber	Daily tracker for patient	+		
Weight:	on:	Name of patient:	Name of patient:	e: take the missed tab se: skip the missed do the same time) to mal	let as soon as you se.
Day of week	Dose prescribed	Week 1-2 Start: /2/09//6	Week 3-4 Start: 26/09/16	Week 5-6 Start: 10/10/16	Week 7-8 Start: 24/10/16
Monday D1	300 mg	g 300 mg	fu 300 mg		
Tuesday D2	300 mg) x 300 mg	bu 008 x /		
Wednesday D3	300 mg	f x 300 mg	bu 300 mg		
Thursday D4	300 mg	gn 00€ × 1	bu 008 x /		
Friday D5	300 mg	bu 300 x 1	bu 300 mg		
Saturday D6	300 mg	f x 300 mg	bu 300 mg		
Sunday D7	300 mg	Pm 300 × 1	ete.		

Day of week	Dose prescribed	Week 1-2 Start: /2/09/16	Week 3-4 Start: 26/09/16	Week 5-6 Start: 10/10/16	Week 7-8 Start: 24/10/16
Monday D8	300 mg	/ x 300 mg			
Tuesday D9	300 mg	1 x 300 mg			
Wednesday D10	300 mg	1 x 300 mg			
Thursday D11	300 mg	bu 008 * 1			
Friday D12	300 mg	1 x 300 mg			
Saturday D13	300 mg) x 300 mg			
Sunday D14	300 mg	bu 300 mg			

Doses available	Comments for patient and/or important information)	Comments for patient and/or patient's caregiver (side effects, other treatment, or important information)
100 mg =	increased dose after 8 w 200 my daily	
200 mg = 200 mg		
300 mg =		

Blank copies Package leaflet has to be provided with dosing guide.

In case of any drug related adverse events, please

contact: The National Pharmacovigilance Center (NPC):

Call Center: 19999

E-mail: npc.drug@sfda.gov.sa Website: https://ade.sfda.gov.sa



For SANOFI Pharmacovigilance center, please contact:

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sanofi