



# Understanding your medicine

This booklet contains important  
information about KISQALI.

# We're here to help

With a new treatment comes a lot of information to take in. Remember to ask questions. If there's something you don't understand or anything you're unsure about, always ask your healthcare team.



# Inside this booklet you will find information:

- About KISQALI
- How to take KISQALI
- Living life with KISQALI

# About KISQALI (ribociclib)

Starting a new therapy for metastatic breast cancer can be daunting. Understanding what to expect from KISQALI can help you feel empowered and in control.

## Who is KISQALI for?

KISQALI is an oral tablet used to treat hormone receptor-positive (HR+), human epidermal growth factor receptor 2-negative (HER2-) breast cancer that is locally advanced (has spread to nearby tissue or lymph nodes) or metastatic (has spread to other areas of the body).<sup>1</sup>

KISQALI is used in combination with a second medicine, called a hormonal therapy.<sup>1</sup> There are different types of hormonal therapies, including non-steroidal aromatase inhibitors (AI) and selective oestrogen receptor degraders (SERD).<sup>2,3-5</sup>

You will take KISQALI (ribociclib) in combination with either:<sup>1</sup>

A non-steroidal aromatase inhibitor (AI),  
such as letrozole or anastrozole

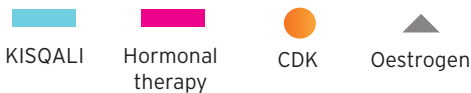
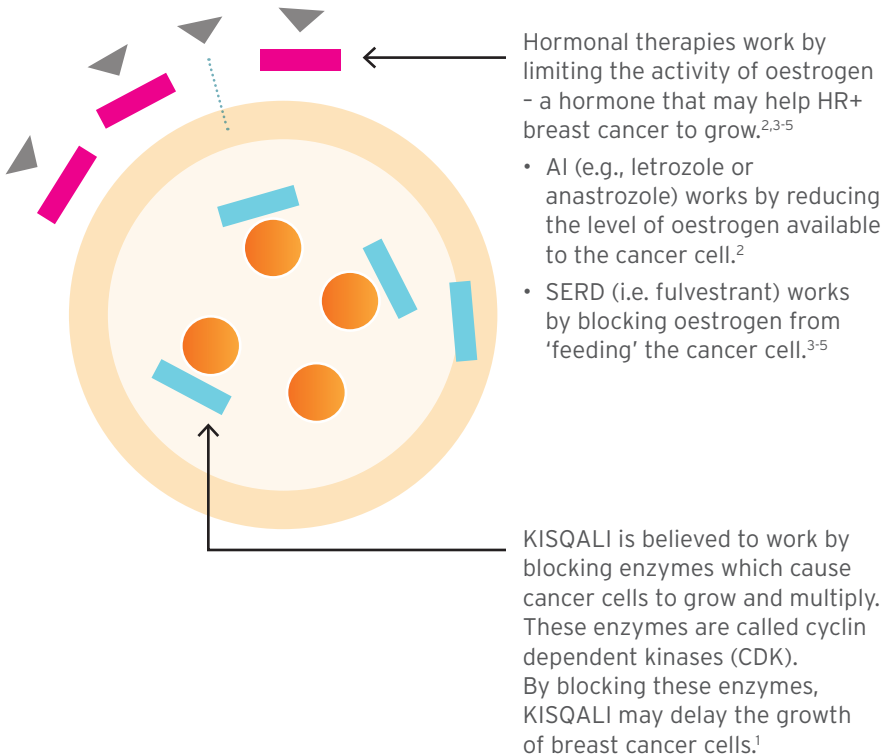
OR

A selective oestrogen receptor degrader  
(SERD) such as fulvestrant

# How does KISQALI work?

The aim of treatment is to delay the growth of breast cancer cells.<sup>1</sup> KISQALI and hormonal therapies work in different ways to achieve this common goal.<sup>2,3-5</sup>

**The image below of a breast cancer cell shows how KISQALI and your hormonal therapy work:**

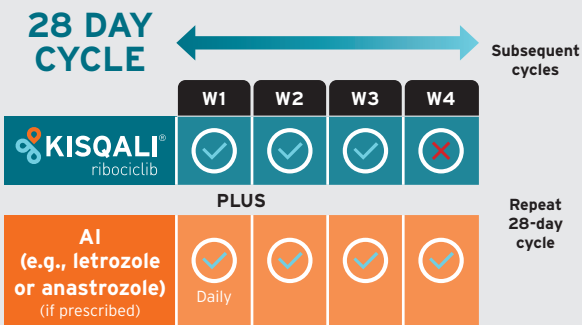


# How to take KISQALI

Take KISQALI **once daily, with or without food**, for 21 days of a 28-day repeating cycle.<sup>1</sup>

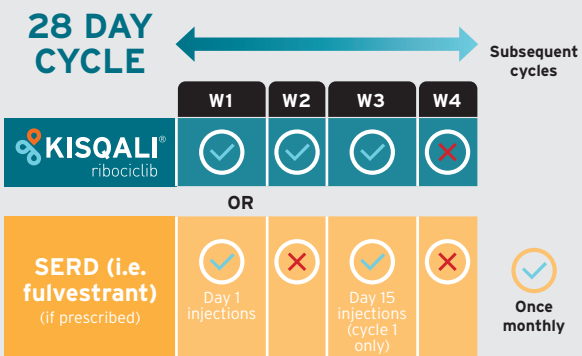
If you are taking KISQALI in combination with an AI (e.g., letrozole or anastrozole)<sup>1</sup>

- **On days 1-21:** Take your KISQALI and your AI (e.g., letrozole or anastrozole) together. You should try to take your medicines at the same time each day, preferably in the morning.
- **On days 22-28:** Do not take your KISQALI. Continue to take your AI (e.g., letrozole or anastrozole) once daily, without a break.



If you are taking KISQALI in combination with a SERD (i.e. fulvestrant):<sup>1,3-5</sup>

- **On days 1-21:** Take your KISQALI. Ideally, you should try to take it at the same time each day, preferably in the morning.
- **On days 22-28:** Do not take your KISQALI.
- You will receive your SERD (i.e. fulvestrant) injections on one day during the 28-day treatment cycle.



## How long will I take KISQALI for?

This is a long-term treatment.<sup>1</sup> Your doctor will check your condition regularly to ensure that KISQALI is working for you and how you are tolerating it.

## How much KISQALI do I take?

The recommended dose of KISQALI is **600 mg** once daily. That's three x 200 mg tablets.<sup>1</sup>



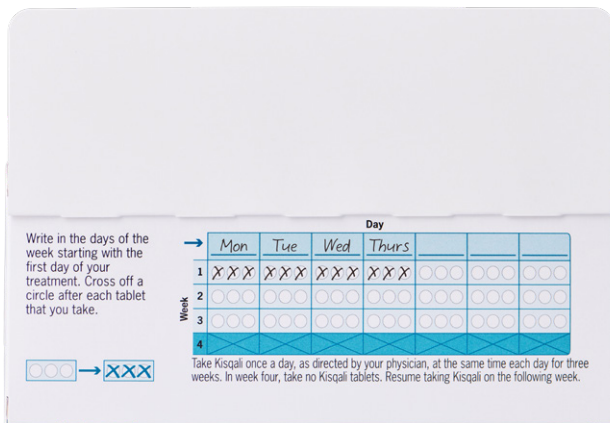
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## What does it mean if my KISQALI dose is reduced?

During your treatment, your doctor may adjust your dose or tell you to stop taking your KISQALI for a period of time (called a dose interruption).

Even if your dose is reduced, this does not mean that the treatment will be less effective. Different doses are needed in different situations, and your doctor will decide on the best dose for you at a given time. It is important to always follow your doctor's recommendations.

# A dosing chart is included within the KISQALI box to help you track your medication



## What if I forget a dose?

If you miss a dose of KISQALI on Days 1 to 21, skip the missed dose that day. Take your next dose at your regular time on the following day. Don't take a double dose to make up for the one you missed.<sup>1</sup>

If you are taking an **AI (e.g., letrozole or anastrozole)** and you miss a dose, take the dose as soon as you remember. If it's almost time for your next dose (within 2 or 3 hours), skip the dose and take your next dose at the regular time.<sup>6-9</sup>

If you are receiving **SERD (i.e. fulvestrant)** injections and you miss a dose, your healthcare team will advise when your next dose is due.

## Can I take KISQALI with other medicines?

Some medicines can interact with KISQALI and increase your risk of experiencing side effects. These include some medicines used to treat:<sup>1</sup>

- Fungal and bacterial infections
- HIV/AIDS
- Seizures or fits
- Heart rhythm problems
- Depression, anxiety or sleep problems.

Before you start KISQALI and your hormonal therapy, tell your doctor or pharmacist about any other medicines you are taking or have taken recently. This includes medicines and supplements that you can buy without a prescription from the pharmacy, supermarket or health food shop.<sup>1</sup>



**⚠ Do not eat grapefruit (or drink grapefruit juice), pomelo, star-fruit or Seville oranges during your treatment with KISQALI. It may change the way your body absorbs KISQALI.<sup>1</sup>**

# How do I store my KISQALI tablets?



Store KISQALI in a cool, dry place (below 30°C)



Keep your tablets in the blister until it is time to take them



Do not store KISQALI in the bathroom, near a sink, or any other place that is hot or steamy



Do not leave the tablets in the car or on window sills

## Keep this medicine where children cannot reach it.

If you are taking an **AI (e.g., letrozole or anastrozole)** or receiving **SERD (i.e. fulvestrant)** injections, refer to the Consumer Medicine Information for storage instructions.

**Talk to a member of your healthcare team if you have any questions or concerns about your treatment.**

# Living life with KISQALI

## Routine tests

Your healthcare team will work hard to ensure you have the best possible experience with KISQALI. One way they'll do this is by using medical tests to monitor your health and by regular check-ups with your healthcare team.



Blood tests to check your liver function and to measure the levels of certain blood cells and electrolytes (potassium, magnesium, calcium or phosphate) in your body.<sup>1</sup>



Electrocardiograms (ECGs) to measure the electrical activity of your heart.<sup>1</sup>

	CYCLE 1	CYCLE 2	CYCLE 3	CYCLE 4	CYCLE 5	CYCLE 6
Blood test <sup>10</sup> 	Baseline & mid-cycle	Beginning & mid-cycle	Beginning of each cycle			
Electrolytes <sup>10</sup>	Baseline	Beginning of each cycle				
ECGs <sup>10</sup> 	Baseline & mid-cycle	Beginning	If needed			

If you are taking an **AI (e.g., letrozole or anastrozole)**, these tests may include blood tests and bone scans.<sup>6-9</sup>

If you are receiving **SERD (i.e. fulvestrant)** injections, these tests may include blood, urine or liver tests.<sup>3-5</sup>

**Your doctor may order additional tests from time to time, including tests to monitor for side effects from the hormonal therapy that you are taking.**

# Managing side effects

Like all medicines, KISQALI may cause some unwanted side effects. Your healthcare team believes that the benefits of KISQALI will outweigh the risk of any side effects you may experience.<sup>1</sup>

## Some very common side effects of KISQALI include:<sup>1</sup>



Tiredness, fatigue, pale skin



Respiratory tract problems such as sore throat, runny nose, blocked nose, sneezing, feeling of pressure or pain in the cheeks or forehead with or without fever, cough, hoarseness, weak voice or voice loss



Mouth, stomach or bowel problems such as reduced appetite, nausea, vomiting, diarrhoea, constipation, mouth sores or ulcers with gum inflammation, stomach pain, upset stomach, indigestion, heartburn, painful and frequent urination



Hair loss or thinning



Rash, itching



Back pain



Headache, fever



Swollen hands, ankles or feet



Dizziness or lightheadedness

Please refer to the KISQALI Consumer Medicine Information (CMI) for a complete list of potential side effects. You can get a copy of the CMI from your healthcare team, or by visiting [www.medsafe.govt.nz](http://www.medsafe.govt.nz)

**It's important to tell your healthcare team about any side effects you experience.**

# Side effects of hormonal therapy

In addition to KISQALI, the hormonal therapy that you are taking may also cause side effects.

Very common side effects of AI (i.e. letrozole) may include: <sup>6-9</sup>	Very common side effects of SERD (i.e. fulvestrant) may include: <sup>3-5</sup>
<ul style="list-style-type: none"><li>• Hot flushes and increased sweating</li><li>• Vaginal dryness</li><li>• Joint and muscle pain</li><li>• Feeling tired</li><li>• High cholesterol</li></ul>	<ul style="list-style-type: none"><li>• Reaction near the site of your injection</li><li>• Feeling weak, lacking energy</li><li>• Nausea</li><li>• Skin rash, itching</li><li>• Joint and muscle pain</li><li>• Hot flushes</li></ul>

Please refer to the **Consumer Medicine Information (CMI)** for your hormonal therapy for a complete list of potential side effects. You can get a copy of the CMI from your healthcare team.

## If you're feeling sleepy or fatigued

- Manage fatigue with rest and regular exercise
- Pace activities throughout the day
- Get at least 8 hours of sleep each night
- Take short naps
- Eat a balanced diet

## **If you have a sore throat, runny nose or signs of a respiratory tract infection**

- Stay hydrated, with warm fluids to soothe your throat
- Ask your healthcare team about lozenges you can use to clear your nose and soothe your throat
- Use a humidifier or vaporiser in your bedroom
- Wash your hands regularly

## **If you're feeling nauseated and/or vomiting**

- Try taking KISQALI with food and not on an empty stomach
- Eat frequent, small meals and have a snack at bedtime
- Drink clear fluids (preferably served cold) to prevent dehydration
- Avoid certain foods that may make nausea worse, such as spicy and fatty foods, and those high in sugar

## **If you have diarrhoea**

- Eat frequent, small meals
- Avoid dairy products; alcohol; tobacco; soda; caffeinated or carbonated drinks; and spicy, fatty, and fibre-rich foods
- Avoid raw vegetables, fruits and acidic fruits/juices
- As diarrhoea starts to improve, add foods low in fibre to your diet, such as bananas, rice, apple sauce, and dry toast
- Drink plenty of clear fluids to prevent dehydration

## More information and support

There is more support available for patients living with metastatic breast cancer, and their whānau/families and friends. We have selected the below groups and websites for their simplicity, accuracy, and up-to-date information. We hope you find them helpful.

### **Breast Cancer Foundation NZ**

[www.breastcancerfoundation.org.nz](http://www.breastcancerfoundation.org.nz)

Offers breast cancer education and support services and information for patients, their families, and friends.

### **Breast Cancer Aotearoa Coalition (BCAC)**

[www.breastcancer.org.nz](http://www.breastcancer.org.nz)

Email: [bcac@breastcancer.org.nz](mailto:bcac@breastcancer.org.nz)

Facebook page: <https://www.facebook.com/BreastCancerAotearoaCoalition>

BCAC is a coalition of over 30 breast cancer-related groups around New Zealand and offer information, support, and representation, empowering those diagnosed to make informed choices about their treatment and care.

### **Metavivors NZ**

Facebook group: <https://www.facebook.com/groups/MetavivorsNZ>

Metavivors NZ is a safe online Facebook-based community for New Zealanders living with advanced breast cancer. It is a wonderful source of peer support, friendship, information, and strength for those diagnosed.

### **Sweet Louise: Support for incurable Breast Cancer**

[www.sweetlouise.org.nz](http://www.sweetlouise.org.nz)

Support Line: 0800 112 277

Sweet Louise provides practical, emotional, and social care and support for New Zealanders living with incurable breast cancer. They provide the compassion and care patients need to live as well as possible, for as long as possible.

## Glossary

**Non-steroidal aromatase inhibitor (AI):** A family of medicines which decrease the amount of oestrogen made by the body; helping to slow the growth of hormone-receptor positive cancer e.g. letrozole, anastrozole.

**Electrocardiogram (ECG):** A test that traces the electrical activity of the heart on a line graph.

**Enzyme:** An enzyme is a substance in the body that helps chemical reactions to occur.

**Fulvestrant:** A type of hormonal therapy for breast cancer that works by blocking some of the actions of oestrogen within the body.

**Human epidermal growth factor receptor 2 negative (HER2-):** Cancer cells which don't have HER2 receptors, which means the cancer won't respond to certain medications (HER2 targeted therapies).

**Hormone receptor positive (HR+):** Cancer cells which have hormone receptors, this means that the cancer cells grow in response to oestrogen and/or progesterone.

**Metastatic breast cancer:** Cancer that has spread from the original tumour to other parts of the body. Also called "advanced" breast cancer.

**Oestrogen:** A hormone that all women normally have in their bodies that can make some types of cancers grow.

**Post-menopausal:** A time in a woman's life when she has gone through menopause i.e. no longer has menstrual periods.

**Receptor:** A receptor is found on the outside of a cell and helps that cell communicate with other cells.

**Selective Oestrogen Receptor Degradator (SERD):** A family of hormonal therapy medicines which binds to the oestrogen receptor causing a reduction in oestrogen e.g. fulvestrant.

# Medication tracker

Complete your KISQALI medication tracker weekly and note down any comments or concerns regarding your treatment. You may wish to discuss your concerns with your Oncologist or Nurse during your appointment.

	Week	Date	KISQALI No. of tablets	KISQALI Dose	AI/SERD	Comments
Cycle 1						
Cycle 2						
Cycle 3						
Cycle 4						
Cycle 5						
Cycle 6						

	Week	Date	KISQALI No. of tablets	KISQALI Dose	AI/SERD	Comments
Cycle 7						
Cycle 8						
Cycle 9						
Cycle 10						
Cycle 11						
Cycle 12						

The information in this booklet has been adapted from KISQALI Consumer Medicine Information.

Your oncologist or oncology nurse is the best person to give you advice on your treatment.

KISQALI Consumer Medicine Information is available from:

**[www.medsafe.govt.nz](http://www.medsafe.govt.nz)**

Kisqali® (ribociclib) 200mg film coated tablet is a prescription medicine. Kisqali is used and will be funded from 1 July 2024 for HR+ HER2- advanced breast cancer, special authority criteria apply, please refer to [www.pharmac.govt.nz](http://www.pharmac.govt.nz). Normal doctor visit fees and prescription charges apply. Kisqali has risks and benefits. Do not take Kisqali if you are allergic to ribociclib or cyclin dependent kinase inhibitors, soy lecithin or any of the ingredients in Kisqali tablets, or if you have a QT prolongation heart problem. Kisqali is not recommended during pregnancy and breast feeding. Tell your doctor if you are taking any other medicines. Side effects can include tiredness, abnormal blood test results, respiratory problems, mouth/stomach/bowel problems, back pain, hair loss, headache, swollen hands/ ankles/feet, dizziness or light-headedness, watering or tearing of the eyes, dry eye, loss of balance, allergic reactions, severe skin reactions, infections with fever, signs of liver problems. Talk to your doctor right away if you experience any of these. It is important not to stop taking the medicine without your doctor's advice. For further information about Kisqali and/or its risks and benefits, refer to the Consumer Medicine Information at the website [www.medsafe.govt.nz](http://www.medsafe.govt.nz). Ask your doctor if Kisqali is right for you. Use strictly as directed. If symptoms continue, you need further information, or you have side effects see your doctor, pharmacist or healthcare professional. ® Registered Trademark.

**References:** **1.** KISQALI New Zealand Consumer Medicine Information. **2.** BreastNet NZ. Endocrine therapy. Available at: <https://www.breastnet.nz/topic/endocrine-therapy> (Accessed May 2024). **3.** Fulvestrant Sandoz New Zealand Data Sheet. **4.** Fulvestrant-AFT New Zealand Data Sheet. **5.** Faslodex New Zealand Data Sheet. **6.** Letara New Zealand Consumer Medicine Information. **7.** Letrole New Zealand Consumer Medicine Information. **8.** Anatrole New Zealand Consumer Medicine Information. **9.** Arimidex New Zealand Consumer Medicine Information. **10.** KISQALI New Zealand Data Sheet.