

Zanubrutinib

This information is about a targeted medicine called zanubrutinib. It is used to treat some people with chronic lymphocytic leukaemia (CLL).

We cover what it is, who might have it and how to take it. We also cover its main side effects and any special precautions you need to take while you're on it.

This information is aimed at people in the UK. We do our best to make sure it is accurate and up to date, but it should not replace advice or guidance from your health professional.

Summary	2
What is zanubrutinib?	3
Who might take zanubrutinib?	3
Before taking zanubrutinib	3
How do you take zanubrutinib?	4
How long do you take it for?	6
How you'll be monitored	6
Precautions to know about	7
Fertility, pregnancy and breastfeeding info	7
Possible side effects	8
What if zanubrutinib doesn't work?	11
Further information	12
If you need support	12

Summary

- Zanubrutinib is a targeted medicine used to treat chronic lymphocytic leukaemia (CLL).
- It comes as tablets or capsules that you take every day. The number of tablets or capsules you need to take and how often should be printed on the named label on your medicine packaging.
- You will have blood tests to check how well your CLL is responding to zanubrutinib.
- Your haematology team will monitor how your body is coping with treatment.
- Side effects of zanubrutinib are usually mild to moderate. Some people have mild side effects, whereas others get more severe side effects.
- Some side effects can be serious if they are not treated promptly. Contact your haematology team straight away if:
 - You have bleeding such as blood in your poo or pee, nosebleeds, bleeding gums, vomiting or coughing up blood, heavy periods or bruising.
 - You think you might have an infection.
 - You have difficulty breathing, shortness of breath or your breathing is very fast.
 - Your heart rate is fast or uneven, or your pulse is weak or uneven.
- Tell your haematology team if you get any other side effects. They may be able to suggest things to help.

This leaflet includes addresses and QR codes that link to webpages for further support. If you cannot access the webpages, please email information@leukaemiacare.org.uk or call 08088 010 444.

What is zanubrutinib?

Zanubrutinib is a targeted medicine that blocks a protein called BTK. This protein helps CLL cells to grow and multiply. Blocking it stops CLL cells from growing and dividing, leading to their death.

The brand name for zanubrutinib is Brukinsa.

Who might take zanubrutinib?

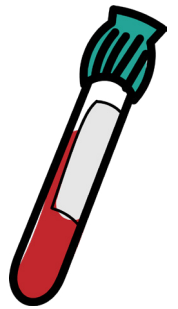
Zanubrutinib is suitable for adults. Your haematology team might recommend it for you if:

- You have CLL and have not had treatment before **and**:
 - You have a genetic change in your CLL cells called 17p deletion or TP53 mutation **or**
 - Other treatments are unsuitable for you.
- You have had treatment, but your CLL didn't respond to it or came back after treatment. This is called refractory or relapsed CLL.

Before taking zanubrutinib

Before starting zanubrutinib, your haematology team will carry out checks to ensure it is suitable for you. These include:

- Blood tests to check your blood cell counts, kidney function and liver function
- Blood tests to check whether you have any infections that could flare up during treatment, such as viral hepatitis
- Checks of your heart health



Your team may recommend other tests, depending on your circumstances.

Your haematology team may ask if there is any possibility you might be pregnant. Zanubrutinib should not be taken during pregnancy.

Some medicines, supplements and food may interact with zanubrutinib. Or they may increase your risk of side effects. It is important to tell your haematology team about any medicines or supplements you are taking. This includes prescribed medicines and medicines you have bought yourself without a prescription.

Medicines or supplements that may interact with zanubrutinib include:

- Herbal medicines such as St John's Wort
- Some blood thinners or medicines used to prevent blood clots, like warfarin
- Some medicines used to treat infections, including some antibiotics, antifungal and antiviral medicines
- Some medicines used to treat a rare sleep problem called narcolepsy
- Some medicines that lower your immune system
- Some medicines used to treat heart conditions and high blood pressure, including high blood pressure in your lungs
- Some medicines used to treat epilepsy
- Some medicines used to treat schizophrenia, severe depression or obsessive-compulsive disorder
- Some medicines used to treat cancer
- Some anti-sickness medicines that are used alongside chemotherapy
- Some opioid medicines that are used for pain relief
- Some medicines used to treat reflux or heartburn

Zanubrutinib capsules contain several ingredients. Tell your haematology team if you have any allergies or sensitivities.

How do you take zanubrutinib?

Zanubrutinib comes as tablets or capsules that you take by mouth. You take zanubrutinib at home (or anywhere you are staying).

- Swallow your zanubrutinib tablets or capsules whole with a glass of water. You can take them with or without food.
- Do not open, break, or chew your tablets or capsules and do not dissolve them in water.
- Try to take your tablets or capsules at about the same time each day. If you take zanubrutinib twice a day, take it at the same time in the morning and evening.
- Avoid grapefruit or bitter oranges (Seville oranges), including the fruit, fruit juice, or foods or supplements containing them. This is because they affect how much zanubrutinib your body absorbs.
- Do not take supplements containing St John's Wort, fish oil, vitamin E or flaxseed while taking zanubrutinib. This is because they affect how much zanubrutinib your body absorbs.

If you forget to take your zanubrutinib:

- Skip the missed dose
- Take your next dose at the usual time

It is important not to take a double dose. If you've taken more zanubrutinib than you should, talk to your doctor, nurse or pharmacist. Or go to the hospital immediately. Take your medicine and the leaflet from its box with you.

Dose

Zanubrutinib comes in two different forms:

- White oval capsules containing 80mg of zanubrutinib
- Blue oval tablets containing 160mg of zanubrutinib

The capsules are gradually being phased out. If you take zanubrutinib capsules, your doctor will switch you to tablets when capsule supplies run out. They will explain the change, and what this means for your dose.

The number of tablets or capsules you need to take should be printed on the medicine packaging. If you are not sure, ask your doctor or nurse.

Most adults with CLL take 320mg of zanubrutinib a day.

White zanubrutinib capsules

You usually take:

- **Four** capsules **once** a day or
- **Two** capsules **twice** a day. You usually leave around 12 hours between each dose.

Blue zanubrutinib tablets

You usually take:

- **Two** tablets **once** a day or
- **One** tablet **twice** a day. You usually leave around 12 hours between each dose.

You can store zanubrutinib at room temperature. Keep it safe where children cannot see or reach it.

How long do you take it for?

Do not stop taking zanubrutinib without discussing it with your haematology team.

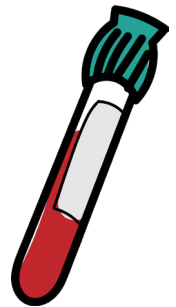
Most people carry on taking zanubrutinib for as long as it is working. Your haematology team may suggest stopping zanubrutinib and trying a different treatment if:

- It is not working well
- It stops working
- You are having side effects that are difficult to cope with
- Check-ups show it is affecting other parts of your body, like your heart, liver or kidneys
- You become pregnant

How you'll be monitored

Your haematology team will check how well zanubrutinib is working and how well your body is coping with it.

- You'll have regular blood tests to check your blood cell counts.
- You'll also have occasional blood tests to check how well your liver and kidneys are working.
- You'll have regular blood pressure checks. Your team may ask you to take your blood pressure at home and keep a record of it.
- Your doctor or nurse will examine you to check for signs and symptoms of:
 - Bleeding.
 - Infection.
 - Heart problems.
 - A rare reaction called tumour lysis syndrome ([page 11](#)).
 - Changes in your skin.
- If needed, you may have other examinations and scans to check the size of your lymph nodes and organs, like your spleen.



Precautions to know about

There are some precautions to be aware of when you are taking zanubrutinib.

- If you need surgery or to have a tooth out, you may need to stop zanubrutinib for 3 to 7 days before and after. This is to reduce your risk of bleeding. Your doctor will tell you exactly when to stop taking zanubrutinib and when to start it again.
- Zanubrutinib can make you vulnerable to serious infections. You might need to take medicines to prevent infections while taking zanubrutinib.
- You should avoid eating grapefruit and starfruit (carambola), including the fruit, fruit juice, or foods or supplements containing them.
- You should avoid eating bitter oranges (Seville oranges), including the fruit, bitter orange juice or food made with bitter oranges, like marmalade.
- You should avoid supplements such as fish oil, flaxseed, or vitamin E preparations.
- Zanubrutinib might make you very tired, low in energy, or dizzy. This might affect your ability to drive or operate machinery.
- Other medicines might interact with zanubrutinib. Your haematology team will tell you whether or how to take other medicines while you are on zanubrutinib.
- If you've had viral hepatitis in the past, it might flare up during zanubrutinib treatment. You'll have a blood test before you start treatment. If this shows you've had viral hepatitis, your team will monitor you for flare-ups. You might be referred to a liver specialist for treatment.

Fertility, pregnancy and breastfeeding info

We do not know what effect zanubrutinib has on fertility or pregnancy. Based on animal studies, it may damage sperm, increase pregnancy loss, and harm unborn babies.

- If you could get pregnant, it's important to use effective contraception while you are taking zanubrutinib and for 1 month after stopping treatment.
- We do not know whether zanubrutinib affects the way hormonal contraceptives work. So, you need to use a barrier method like a condom, diaphragm or cap.
- If you're taking zanubrutinib and you think you might be pregnant, tell your haematology team as soon as possible.
- If you're planning to get pregnant or to make someone pregnant in the future, talk to your haematology team before starting treatment. They will talk to you about your treatment options.

Breastfeeding

We do not know if zanubrutinib passes into breastmilk or what effect it might have on breastfed babies or children.

You should not breastfeed while you are taking zanubrutinib.

Possible side effects

You may get some side effects while you are taking zanubrutinib. Some people have very few side effects, whereas others get more serious side effects. They may differ from day to day.

Your haematology team should tell you what side effects to look out for and who to contact if you need to.

If you are worried about any symptoms or side effects, contact your haematology team. You do not have to wait until your next appointment.

Your haematology team might:

- Prescribe medicines to help manage some side effects
- Suggest things you can do to help you cope with side effects
- Lower your dose of zanubrutinib if your side effects are serious or difficult to cope with
- Recommend pausing or stopping zanubrutinib, if needed

You can also report side effects via the [Yellow Card Scheme](#). Follow the link, scan the QR code or search for 'yellow card' at www.gov.uk. Or search for MHRA Yellow Card in the app store you usually use.



Side effects you might notice

Here, we list some of the more common side effects of zanubrutinib. These affect at least 1 in every 100 people who take zanubrutinib.

- **Infections.** Contact your team straight away if you think you have an infection. Look out for:
 - A high temperature (38°C or higher)
 - Shivering, chills or sweating
 - Sore throat, sneezing, blocked or runny nose or earache
 - Cough, chest pain or shortness of breath
 - Burning or stinging when you pee, or peeing more often than usual
 - Sickness or diarrhoea
 - Cold sores, or ulcers or blisters around your mouth or genitals
- **Unexpected or unusual bruising or bleeding,** like nosebleeds, bleeding gums or heavy periods. Look out for blood in your poo or pee, or red or purple spots under your skin. This may look different in black or brown skin. Tell your team if you notice any of these.
- **Tummy problems.** You might get diarrhoea, constipation, or tummy ache. You might feel sick or be sick. If you have these side effects, your team can give you medicines to help.
- **Muscle, bone or joint pain.** Talk to your team if this becomes troublesome.
- **Changes to your skin.** You might get a rash. This might look different on black or brown skin.
- **Fatigue.** You might experience extreme tiredness or lack of energy.
- **Dizziness.** You might feel lightheaded.
- **Swelling.** You might have swelling of your feet, ankles or hands.
- **Heart problems.** Contact your doctor if you get a fast or irregular heartbeat or a heart flutter. They will check your heart function.



Protecting yourself from skin cancer

Zanubrutinib can increase your risk of getting some types of skin cancer.

It is important to protect your skin from the sun by keeping your skin covered, wearing a wide-brimmed hat, and using a high-factor sunscreen (SPF 30 or higher).

Check for symptoms like a growth, an unusual patch (this can vary in size, colour and texture), a new mole or a change in an existing mole. If you notice any of these, contact your GP.

Side effects your team might notice

There might be some side effects that your haematology team find during regular checks and blood tests. These include:

- Low levels of white blood cells called neutrophils (neutropenia). This makes you more vulnerable to infections. You might need treatment to prevent or treat infections.
- Low levels of red blood cells (anaemia).
- Low levels of platelets (thrombocytopenia). This can cause unusual bruising and bleeding because platelets help your blood to clot. You might need to have a transfusion.
- High blood pressure. If this happens, you might need to take blood pressure medicines.
- High levels of white blood cells. This might happen when you first start zanubrutinib. Your white blood cells may go up before they come down again. It doesn't mean your CLL is getting worse.

This is not a full list of all the side effects that can happen. The patient information leaflet in your medicine package has more information. Or you can find the leaflet in the [Electronic Medicines Compendium](#). Follow the link, scan the QR code or search for 'zanubrutinib' at www.medicines.org.uk/emc.



Rare side effects to know about

Rarely, zanubrutinib might cause a side effect called **tumour lysis syndrome**. This is a serious side effect of some cancer treatments. It happens if a large number of cancer cells die quickly and release chemicals into your bloodstream. This affects fewer than 1 in every 100 people taking zanubrutinib. So, it does **not** happen to more than 99 in every 100 people. However, if it does happen, it can be serious, so it's sensible to know what to look out for.

Symptoms of tumour lysis syndrome

Contact your doctor immediately if you develop any of the following while taking zanubrutinib:

- Fever or chills
- Diarrhoea, feeling sick or being sick
- Muscle or joint pain
- Cloudy or dark-coloured pee
- Feeling weak, exhausted or confused
- Irregular heartbeat or shortness of breath
- Pain or bloating in your tummy
- Seizures (fits)



"If you have to go to A&E, tell the staff you have blood cancer and the treatment you're on. Your team might give you a Patient Alert Card to keep with you. In a medical emergency, these cards let people know what medicine you're taking and help keep you safe."

Steve, living with CLL since 2011

What if zanubrutinib doesn't work?

If zanubrutinib is not working well for you, your doctor will discuss your options with you. They might suggest changing your dose, pausing or stopping treatment. They will talk to you about other treatment options that might be suitable for you.

Further information

We have more [information about CLL](#) including booklets and factsheets to download. Follow the link, scan the QR code or search 'CLL' at leukaemiacare.org.uk



We also have [booklets you can order in print free of charge](#). Follow the link or search 'CLL' at shop.leukaemiacare.org.uk or scan the QR code.



We'd like to thank the expert reviewers and patient contributors who helped us with this information:

- Professor George Follows, Consultant Haematologist, Cambridge University Hospitals NHS Foundation Trust
- Helen Knight, CLL Clinical Nurse Specialist, Nottingham University Hospitals
- Patient reviewers and contributors: Helen, Jane and Steve

Feedback on this leaflet? Follow the link or scan the QR code to complete a [short survey](#) to tell us what we can improve. Or get in touch by email, phone or post.



- Email information@leukaemiacare.org.uk
- Call us on **08088 010 444**
- Write to **Leukaemia Care, One Birch Court, Blackpole East, Worcester, WR3 8SG**

You can also contact us if you'd like a list of the sources we used for this leaflet.

If you need support

[We're here for you if you need support](#). Follow the link, scan the QR code or visit 'support and community' at leukaemiacare.org.uk to find out how we can help you.



If you'd like advice, support, or just someone to talk to:

- Call our freephone helpline on **08088 010 444** (weekdays 9am to 4.30pm)
- Send a WhatsApp message to **07500 068065** (weekdays 9am to 4.30pm)

