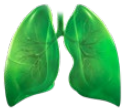
KEYTRUDA®
(pembrolizumab) Injection 100 mg

A Key to More Tomorrows is Possible for Your Patients

KEYTRUDA® listed in MOH Cancer Drug List*[1,2]

	Approved Local Indications[1]	Trial(s)[1]	CDL
 NON-SMALL CELL LUNG CARCINOMA	**1L** **NSCLC (KEYTRUDA® monotherapy)** For patients with previously untreated metastatic NSCLC in patients whose tumours express PD-L1 with TPS ≥50%, with no EGFR or ALK genomic tumour aberrations.	KN-024	✓
	1L **NSQ NSCLC (KEYTRUDA® + chemotherapy)[a]** Patients with previously untreated metastatic non-squamous NSCLC in patients with no EGFR or ALK genomic tumour aberrations.	KN-189	✓
	1L **SQ NSCLC (KEYTRUDA® + chemotherapy)[b]** Patients with previously untreated metastatic squamous NSCLC.	KN-407	✓
	2L **NSCLC (KEYTRUDA® monotherapy)** For patients with metastatic NSCLC, whose tumours express PD-L1 with TPS ≥1% and had disease progression during or following platinum-containing chemotherapy. Patients must not have received prior treatment with a PD-1/PD-L1 inhibitor for metastatic NSCLC.	KN-010, KN-001	✓
 HEAD AND NECK SQUAMOUS CELL CARCINOMA	**KEYTRUDA® as monotherapy or chemotherapy combination[c]** For patients with previously untreated unresectable, recurrent or metastatic HNSCC with PD-L1 CPS ≥1%.	KN-048	✓

* Scheduled implementation September 2022. [a] pemetrexed + carboplatin or cisplatin. [b] carboplatin and either paclitaxel or nab-paclitaxel. [c] platinum and 5-fluorouracil (5-FU) chemotherapy.

1L = first-line; 2L = 2nd Line; ALK = anaplastic lymphoma kinase; CDL = Cancer Drug List; EGFR = epidermal growth factor receptor; HNSCC = head and neck squamous cell carcinoma; KN = Keynote; MAF = Medication Assistance Fund; MOH = Ministry of Health; NSCLC = non-small cell lung cancer; NSG = non-squamous; PD-L1 = programmed cell death ligand-1; SQ = squamous; TPS = tumor proportion score.

Selected Safety Information

INDICATIONS *Melanoma:* KEYTRUDA (pembrolizumab) is indicated for the treatment of patients with unresectable or metastatic melanoma. KEYTRUDA is indicated for the adjuvant treatment of patients with melanoma with lymph node involvement who have undergone complete resection. *Non-Small Cell Lung Carcinoma:* KEYTRUDA, in combination with pemetrexed and platinum chemotherapy, is indicated for the first-line treatment of patients with metastatic non-squamous non-small cell lung carcinoma (NSCLC), with no EGFR or ALK genomic tumor aberrations. KEYTRUDA, in combination with carboplatin and either paclitaxel or nab-paclitaxel, is indicated for the first-line treatment of patients with metastatic squamous NSCLC. KEYTRUDA as monotherapy is indicated for the first-line treatment of patients with metastatic NSCLC whose tumors express PD-L1 with a ≥50% tumor proportion score (TPS) as determined by a validated test, with no EGFR or ALK genomic tumor aberrations. KEYTRUDA as monotherapy is indicated for the treatment of patients with locally advanced or metastatic NSCLC whose tumors express PD-L1 with a ≥1% TPS as determined by a validated test and who have received platinum-containing chemotherapy. Patients with EGFR or ALK genomic tumor aberrations should have received prior therapy for these aberrations prior to receiving KEYTRUDA. *Head and Neck Cancer:* KEYTRUDA, as monotherapy or in combination with platinum and 5-fluorouracil (5-FU) chemotherapy, is indicated for the first line treatment of patients with metastatic or unresectable recurrent head and neck squamous cell carcinoma (HNSCC) whose tumours express PD-L1 with a CPS ≥ 1. *Classical Hodgkin Lymphoma:* KEYTRUDA is indicated for the treatment of adult and pediatric patients aged 3 years and above, with relapsed or refractory classical Hodgkin lymphoma (cHL), who have failed autologous stem cell transplant (ASCT) or following at least two prior therapies when ASCT is not a treatment option. *Urothelial Carcinoma*: KEYTRUDA is indicated for the treatment of patients with locally advanced or metastatic urothelial carcinoma whose tumours express PD-L1 with a combined positive score (CPS) ≥10 as determined by a validated test, and who are not eligible for cisplatin-containing chemotherapy. KEYTRUDA is indicated for the treatment of patients with locally advanced or metastatic urothelial carcinoma who have received prior platinum-containing chemotherapy. *Esophageal Cancer:* KEYTRUDA, in combination with platinum and fluoropyrimidine based chemotherapy, is indicated for the first-line treatment of patients with locally advanced or metastatic carcinoma of the esophagus or HER2 negative gastroesophageal junction (GEJ) adenocarcinoma (tumors with epicenter 1 to 5 centimeters above the GEJ) that is not amenable to surgical resection or definitive chemoradiation. *Colorectal Cancer:* KEYTRUDA is indicated for the first-line treatment of patients with metastatic microsatellite instability-high (MSI H) or mismatch repair deficient (dMMR) colorectal cancer (CRC). *Renal Cell Carcinoma:* KEYTRUDA, in combination with axitinib, is indicated for the first-line treatment of patients with advanced renal cell carcinoma (RCC). *Endometrial Carcinoma:* KEYTRUDA, in combination with lenvatinib, is indicated for the treatment of patients with advanced endometrial carcinoma that is not microsatellite instability-high (MSI-H) or mismatch repair deficient (dMMR), who have disease progression following prior chemotherapy in the metastatic setting and are not candidates for curative surgery or radiation. *Triple Negative Breast Cancer:* KEYTRUDA, in combination with chemotherapy, is indicated for the treatment of patients with locally recurrent unresectable or metastatic triple negative breast cancer (TNBC) whose tumors express PD L1 (CPS ≥10) as determined by a validated test and who have not received prior chemotherapy for metastatic disease. **DOSING** KEYTRUDA is administered as an intravenous infusion over 30 minutes. The recommended dose of KEYTRUDA in adults with HNSCC, cHL, urothelial carcinoma, CRC, RCC, endometrial carcinoma, TNBC, previously untreated NSCLC, or for the adjuvant treatment of melanoma is either: • 200 mg every 3 weeks or • 400 mg every 6 weeks. The recommended dose of KEYTRUDA in adults with previously treated NSCLC or for unresectable or metastatic melanoma is 2 mg/kg every 3 weeks. Patients should be treated with KEYTRUDA until disease progression or unacceptable toxicity. For the adjuvant treatment of melanoma, KEYTRUDA should be administered for up to one year or until disease recurrence or unacceptable toxicity. **CONTRAINDICATIONS** KEYTRUDA is contraindicated in patients with hypersensitivity to pembrolizumab or any of the inactive ingredients. **PRECAUTIONS/WARNINGS** Immune-mediated adverse reactions, including severe and fatal cases, have occurred in patients receiving KEYTRUDA. List of immune-mediated adverse reactions include but are not limited to: pneumonitis; colitis; hepatitis; nephritis; endocrinopathies; severe skin reactions. Transplant-related adverse reaction such as risk of rejection in solid organ transplant recipients; complications of allogeneic HSCT after treatment with KEYTRUDA; graft-versus-host disease (GVHD) and hepatic veno-occlusive disease (VOD) have been observed. Elevated liver enzymes when KEYTRUDA is given in combination with axitinib for RCC. Increased mortality in patients with multiple myeloma when KEYTRUDA is added to a thalidomide analogue and dexamethasone. Infusion-related reactions including hypersensitivity and anaphylaxis. **ADVERSE REACTIONS** Most frequent adverse reactions (reported ≥ 20% patients) were: KEYTRUDA as monotherapy: fatigue, nausea, and diarrhoea. KEYTRUDA in combination with chemotherapy: nausea, anaemia, fatigue, constipation, decreased appetite, diarrhoea, neutropenia and vomiting. KEYTRUDA in combination with axitinib: diarrhoea, hypertension, fatigue, hypothyroidism, decreased appetite, palmar-plantar erythrodysaesthesia syndrome, nausea, ALT increased, AST increased,dysphonia, cough, and constipation. KEYTRUDA in combination with lenvatinib: hypertension, diarrhea, fatigue, decreased appetite, hypothyroidism, nausea, vomiting, stomatitis, decreased weight, arthralgia, headache, constipation, dysphonia, urinary tract infection, abdominal pain, hypomagnesemia, palmar-plantar erythrodysesthesia, dyspnea, cough, myalgia, and back pain.

Before prescribing Keytruda, please consult full prescribing information. Full prescribing information is available upon request.

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For Healthcare Professionals Only.

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REFERENCES: 1. KEYTRUDA® Local Product Information February 2022.
2. Ministry of Health Singapore. Cancer Drug List [Internet]. Singapore: Ministry of Health Singapore; updated 20 Apr 2022 [cited on 01 June 2022]. Available from: https://www.moh.gov.sg/home/our-healthcare-system/medishield-life/what-ismedishield-life/whatmedishield-lifebenefits/cancer-drug-list

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