



## Abiraterone Acetate (Zytiga®)

**Pronounced:** A-bir-A-ter-one AS-e-tate

**Classification:** Anti-androgen

### About Abiraterone Acetate (Zytiga®)

Most prostate cancers need the male hormone testosterone to grow. Testosterone is an androgen (type of hormone) produced by the testes and adrenal glands. Anti-androgen therapies work by blocking an enzyme necessary for the production of testosterone. Without testosterone, the cancer cells may either grow more slowly, or stop growing altogether

### How to Take Abiraterone Acetate

Abiraterone acetate is given as multiple tablets that should be taken once a day, on an empty stomach. You should not eat 2 hours before and 1 hour after your dose. Swallow the tablets whole with water; do not chew, break or crush them. If you are having trouble swallowing the tablets, you should contact your pharmacist or care provider. If you forget to take a dose, take your next dose at the regularly scheduled time. Do not take an extra dose to make up for the missed dose. If you miss more than one daily dose you should contact your care team.

It is important to make sure you are taking the correct amount of medication every time. Before every dose, check that what you are taking matches what you have been prescribed. This medication is also taken with prednisone (a steroid), be sure you take this medication as prescribed.

The blood levels of this medication can be affected by certain foods and medications, so they should be avoided. These include (but are not limited to): rifampin, phenytoin, carbamazepine, rifabutin, rifapentine, and phenobarbital. Be sure to tell your healthcare provider about all medications and supplements you take.

### Storage and Handling

Store your medication in the original, labeled container at room temperature and in a dry location (unless otherwise directed by your healthcare provider or pharmacist). This medication should not be stored in a pillbox. Keep containers out of reach of children and pets.

If a caregiver prepares your dose for you, they should consider wearing gloves or pour the pills directly from their container into the cap, a small cup, or directly into your hand. They should avoid touching the pills. They should always wash their hands before and after giving you the medication. Pregnant or nursing women should not prepare the dose for you. Ask your oncology team where to return any unused medication for disposal. Do not flush down the toilet or throw in the trash.

### Where do I get this medication?

Abiraterone acetate is available through select specialty pharmacies. Your oncology team will work with your prescription drug plan to identify an in-network specialty pharmacy for distribution of this medication and shipment directly to your home.

### Insurance Information

This medication may be covered under your prescription drug plan. Patient assistance may be available to qualifying individuals depending upon prescription drug coverage. Co-pay cards, which reduce the patient co-pay responsibility for eligible commercially (non-government sponsored) insured patients, may also be available. Your care team can help you find

these resources, if they are available.

## Possible Side Effects of Abiraterone Acetate

There are a number of things you can do to manage the side effects of abiraterone acetate. Talk to your care team about these recommendations. They can help you decide what will work best for you. These are some of the most common or important side effects:

### **Fatigue**

**Fatigue** is very common during cancer treatment and is an overwhelming feeling of exhaustion that is not usually relieved by rest. While on cancer treatment, and for a period after, you may need to adjust your schedule to manage fatigue. Plan times to rest during the day and conserve energy for more important activities. Exercise can help combat fatigue; a simple daily walk with a friend can help. Talk to your healthcare team for helpful tips on dealing with this side effect.

### **Muscle or Joint Pain/Aches and Headache**

Your healthcare provider can recommend medications and other strategies to help relieve pain.

### **Peripheral Edema**

Peripheral edema is swelling of the extremities caused by the retention of fluid. It can cause swelling of the hands, arms, legs, ankles and feet. The swelling can become uncomfortable. Notify your oncology care team if you are experiencing any new or worsening swelling.

### **Hot Flashes**

There are a few things you can do to help with hot flashes. Several medications have been shown to help with symptoms, including clonidine (a blood pressure medication), low doses of certain antidepressants (such as venlafaxine and fluoxetine), and gabapentin. Talk to your healthcare team about these prescription products to determine if they are right for you.

Non-medical recommendations include:

- Keep well-hydrated with eight glasses of water daily.
- Drink ice water or apply an ice pack at the onset of a hot flash.
- Wear cotton or lightweight, breathable fabrics and dress in layers so you can adjust as needed.
- Exercise on a regular basis.
- Try practicing meditation or relaxation exercises to manage stress, which can be a trigger.
- Avoid triggers such as warm rooms, spicy foods, caffeinated beverages, and alcohol.

### **Blood Sugar Changes**

This medication can cause lower than normal or elevated blood sugar levels in patients with and without diabetes. Your oncology care team will monitor your blood sugar. Symptoms of low blood sugar include shakiness, fast heartbeat, dizziness, increased hunger, sweating, and confusion. Signs of high blood sugar are increased thirst, urination or hunger, blurry vision, headaches or your breath smells like fruit. If you have any of these symptoms you should notify your healthcare team. Diabetics should monitor their blood sugar closely and report elevations to the healthcare team.

### **Changes in Mood**

Some men report mood swings and depression while on hormone therapy. It can be helpful to talk about concerns and feelings with a partner or close friend. If you find that feelings of sadness are interfering with life, talk with your team about finding a counselor experienced in working with cancer patients.

### **Weakening of the Bones (Osteoporosis)**

Men who take hormone therapy for extended periods of time are at risk for bone thinning (osteoporosis). You may be advised to get plenty of calcium and vitamin D to reduce your risk of osteoporosis. It is best to get calcium in a balanced diet, including 4-8 servings of calcium rich foods a day. Examples of calcium rich foods are low fat milk, yogurt, cheese, green leafy vegetables, nuts, seeds, beans, legumes, and calcium fortified foods and juices. Vitamin D is not present in many foods, so it is harder to

get in your diet. Our bodies make vitamin D when the sun hits our skin, but sun avoidance and sunblock prevent many from getting the necessary amounts to support bone health. Your care team may recommend supplements of calcium and vitamin D and will tell you how much to take. Weight-bearing exercise and strength exercises can also help protect your bone health.

You may have a bone density scan (DEXA scan) to assess your bone health. If your provider determines that you are at high risk of developing osteoporosis, they may recommend additional treatment with a type of medication called a bisphosphonate to help strengthen the bones.

### ***Less common, but important side effects can include:***

- **Electrolyte Abnormalities:** This medication can affect the normal levels of electrolytes in your body. Your levels will be monitored using blood tests. If your levels become too low, your care team may prescribe specific electrolytes to be given by IV or taken by mouth. Do not take any supplements without first consulting with your care team.
- **High Blood Pressure:** This medication can cause high blood pressure (hypertension) and swelling. Patients should have their blood pressure checked regularly during therapy. Any hypertension should be treated appropriately. If hypertension cannot be controlled, the medication may be stopped. If you experience headaches, dizziness, fast heartbeat, rapid weight gain or swelling in your legs or feet, notify your oncology team.
- **Liver Toxicity:** This medication can cause liver toxicity, which your doctor may monitor for using blood tests called liver function tests. Notify your healthcare provider if you notice yellowing of the skin or eyes, your urine appears dark or brown or pain in your abdomen, as these can be signs of liver toxicity.
- **Adrenocortical Insufficiency:** This medication is often given with prednisone. You should not stop taking your prednisone without consulting your care team. There may be instances when you will need to increase your dose of steroid. Do not take more than you were prescribed without consulting your care team.

### ***Sexual & Reproductive Concerns***

This drug can affect your reproductive system, resulting in sperm production becoming irregular or stopping permanently. In addition, you may experience erectile dysfunction or a decreased desire for sex during treatment. Talk to your urologist about options for treating erectile dysfunction.

Exposure of an unborn child to this medication could cause birth defects, so you should not father a child while on this medication. Effective birth control is necessary during treatment and for three weeks after your last dose, even if you believe you are not producing sperm. If you are having sex with a woman of childbearing age, you should be using a condom and one other form of birth control at the same time. You may want to consider sperm banking if you may wish to have a child in the future. Discuss these options with your oncology team.

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