Retifanlimab-dlwr (ZYNYZ)
National Drug Monograph
December 2024
VA Pharmacy Benefits Management Services and National Formulary Committee

The purpose of VA National Formulary Committee drug monographs is to provide a focused drug review for making formulary decisions. The Product Information or other resources should be consulted for detailed and most current drug information.

FDA APPROVAL INFORMATION

Description / MOA	Programmed Death Receptr-1 (PD-1)-blocking antibody
Indication Under Review	Metastatic or recurrent locally advanced Merkel cell carcinoma (rare, aggressive, cutaneous malignancy that predominantly affects older adults with light skin) (accelerated approval)
Dosage Regimen	500mg infusion over 30 minutes every 4 weeks
Dosage Forms Under Review	500g/20mL injection

EFFICACY CONSIDERATIONS

Trial	PODIUM-201
Design	Open-label, single-arm, Phase 2 study
Population	Chemotherapy-naïve (or chemotherapy-refractory) advanced/metastatic Merkel cell carcinoma; ECOG 0-1
Demographics	N=87; results for the first 65 pts; Med age: 71; Male 65%; White 78%; ECOG 0: 74%; Merkel cell polyomavirus (MCPyV) positive: 71%; metastatic disease: 88%
Intervention	Retifanlimab 500mg IV over 30 mins every 4 weeks up to 24 months
Comparator	None
Results	Objective Response Rate: 52% (Complete 18%); Duration of response, mos: 1.1-24.9; Duration ≥12 mos: 62%
Notes	**NCCN : Primary Locally Advanced Disease or Recurrent Disease or Metastatic Disease (cat 2B)** **Other recommended regimens (also cat 2B):** **Primary Locally Advanced Disease: Avelumab, Pembrolizumab** **Recurrent Disease: Pembrolizumab, Avelumab** **Disseminated/Metastatic Disease: Pembrolizumab, Avelumab, Nivolumab, Retifanlimab** **VA Oncology Clinical Pathway: Metastatic disease & not a candidate for locoregional therapy: recommend Pembrolizumab** **Alternative options: locoregional treatment (if a candidate) or nivolumab+ipilimumab or carboplatin+etoposide if previous PD-1 therapy**

SAFETY CONSIDERATIONS

Boxed Warnings	None
Contraindications	None
Other Warnings	Immune-Mediated Adverse Events, Infusion-Related Reactions, Complications of Stem-cell Transplant, Embryo-fetal toxicity
Top 5 AEs	Fatigue, musculoskeletal pain, pruritis, diarrhea, rash
Drug Interactions	None

VHA PLACE IN THERAPY		
	Potential Use in VHA	1. Optimal therapy for advanced disease is not well-defined. Single-agent immunotherapy is generally preferred over chemotherapy. 2. Pembrolizumab and avelumab, although also studied in small populations, have durable responses with longer follow-up data than retifanlimab. 3. Retifanlimab does not offer an advantage over pembrolizumab or avelumab in MCC. 4. Retifanlimab is being studied in other solid tumors

Grignani G, Rutkowski P, Lebbe C, et al. A phase 2 study of retinfanlimab in patients with advanced or metastatic Merkel Cell Carcinoma (MCC) (PODIUM-201); J Immunother Cancer 2021; 9 (Suppl 2): A574.
Zynyz (retinfamlimab-dlwr) injection Package Label; Incyte Corporation, Wilmington, DE: 2024.

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