

## HIGHLIGHTS OF PRESCRIBING INFORMATION

These highlights do not include all the information needed to use EVEROLIMUS TABLETS safely and effectively. See full prescribing information for EVEROLIMUS TABLETS.

### EVEROLIMUS tablets, for oral use

Initial U.S. Approval: 2009

#### RECENT MAJOR CHANGES

Warnings and Precautions, Radiation Sensitization and Radiation Recall (5.12) 4/2021

#### INDICATIONS AND USAGE

Everolimus Tablets is a kinase inhibitor indicated for the treatment of:

- Postmenopausal women with advanced hormone receptor-positive, HER2-negative breast cancer in combination with exemestane after failure of treatment with letrozole or anastrozole. (1.1)
- Adults with progressive neuroendocrine tumors of pancreatic origin (PNET) [Limitations of Use: Everolimus Tablets is not indicated for the treatment of patients with functional carcinoid tumors. (1.2)]
- Adults with advanced renal cell carcinoma (RCC) after failure of treatment with sunitinib or sorafenib. (1.3)
- Adults with renal angiomyolipoma and tuberous sclerosis complex (TSC), not requiring immediate surgery. (1.4)

Everolimus Tablets are kinase inhibitors indicated for the treatment of adult and pediatric patients aged 1 year and older with TSC who have subependymal giant cell astrocytoma (SEGA) that requires therapeutic intervention but cannot be curatively resected. (1.5)

#### DOSAGE AND ADMINISTRATION

Modify the dose for patients with hepatic impairment or for patients taking drugs that inhibit or induce P-glycoprotein (P-gp) and CYP3A4. (2.1)

Breast Cancer:

- 10 mg orally once daily. (2.2)

PNET:

- 10 mg orally once daily. (2.3)

RCC:

- 10 mg orally once daily. (2.4)

TSC-Associated Renal Angiomyolipoma:

- 10 mg orally once daily. (2.5)

TSC-Associated SEGA:

- 4.5 mg/m<sup>2</sup> orally once daily; adjust dose to attain trough concentrations of 5-15 ng/mL. (2.6, 2.8)

#### DOSAGE FORMS AND STRENGTHS

Everolimus Tablets: 2.5 mg, 5 mg, 7.5 mg, and 10 mg tablets with no score (3)

#### CONTRAINDICATIONS

Clinically significant hypersensitivity to everolimus or to other rapamycin derivatives. (4)

#### WARNINGS AND PRECAUTIONS

- Non-infectious Pneumonitis: Monitor for clinical symptoms or radiological changes. Withhold or permanently discontinue based on severity. (2.9, 5.1)
- Infections: Monitor for signs and symptoms of infection. Withhold or permanently

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#### FULL PRESCRIBING INFORMATION

##### 1 INDICATIONS AND USAGE

**1.1 Hormone Receptor-Positive, HER2-Negative Breast Cancer**  
Everolimus Tablets are indicated for the treatment of postmenopausal women with advanced hormone receptor-positive, HER2-negative breast cancer in combination with exemestane, after failure of treatment with letrozole or anastrozole.

**1.2 Neuroendocrine Tumors (NET)**  
Everolimus Tablets are indicated for the treatment of adult patients with progressive neuroendocrine tumors of pancreatic origin (PNET) with unresectable, locally advanced or metastatic disease.

**1.3 Renal Cell Carcinoma (RCC)**  
Everolimus Tablets are indicated for the treatment of adult patients with progressive renal cell carcinoma (RCC) after failure of treatment with sunitinib or sorafenib.

**1.4 Tuberous Sclerosis Complex (TSC)-Associated Renal Angiomyolipoma**  
Everolimus Tablets are indicated for the treatment of adult patients with renal angiomyolipoma and TSC, not requiring immediate surgery.

**1.5 Tuberous Sclerosis Complex (TSC)-Associated Subependymal Giant Cell Astrocytoma (SEGA)**  
Everolimus Tablets are indicated for the treatment of adult and pediatric patients aged 1 year and older with TSC for the treatment of SEGA that requires therapeutic intervention but cannot be curatively resected.

##### 2 DOSAGE AND ADMINISTRATION

**2.1 Important Dosage Information**  
Everolimus Tablets are available in one dosage form: tablets (Everolimus Tablets). Modify the dosage for patients with hepatic impairment or for patients taking drugs that inhibit or induce P-glycoprotein (P-gp) and CYP3A4 [see Dosage and Administration (2.10, 2.11, 2.12)].

**2.2 Recommended Dosage for Hormone Receptor-Positive, HER2-Negative Breast Cancer**  
The recommended dosage of Everolimus Tablets is 10 mg orally once daily until disease progression or unacceptable toxicity.

**2.3 Recommended Dosage for Neuroendocrine Tumors (NET)**  
The recommended dosage of Everolimus Tablets is 10 mg orally once daily until disease progression or unacceptable toxicity.

**2.4 Recommended Dosage for Renal Cell Carcinoma (RCC)**  
The recommended dosage of Everolimus Tablets is 10 mg orally once daily until disease progression or unacceptable toxicity.

**2.5 Recommended Dosage for Tuberous Sclerosis Complex (TSC)-Associated Renal Angiomyolipoma**  
The recommended dosage of Everolimus Tablets is 10 mg orally once daily until disease progression or unacceptable toxicity.

**2.6 Recommended Dosage for Tuberous Sclerosis Complex (TSC)-Associated Subependymal Giant Cell Astrocytoma (SEGA)**  
The recommended starting dosage of Everolimus Tablets is 4.5 mg/m<sup>2</sup> orally once daily until disease progression or unacceptable toxicity [see Dosage and Administration (2.8)].

**2.7 Therapeutic Drug Monitoring (TDM) and Dose Titration for Tuberous Sclerosis Complex (TSC)-Associated Subependymal Giant Cell Astrocytoma (SEGA)**  
The recommended starting dosage of Everolimus Tablets is 4.5 mg/m<sup>2</sup> orally once daily until disease progression or unacceptable toxicity [see Dosage and Administration (2.8)].

**2.8 Administration and Preparation**  
Everolimus Tablets should be swallowed whole with a glass of water. Do not break or crush tablets.

**2.9 Infections**  
Monitor for signs and symptoms of infection. Withhold or permanently discontinue based on severity. (2.9, 5.1)

**2.10 Non-infectious Pneumonitis**  
Monitor for clinical symptoms or radiological changes. Withhold or permanently discontinue based on severity. (2.9, 5.1)

**2.11 Infections**  
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