

Prophylaxis, Monitoring & Management of Dato-DXd associated Adverse Events

Key clinical takeaways



Datopotamab deruxtecan (Dato-DXd) shows clinically meaningful activity in previously treated advanced solid tumours (including NSCLC and HR+/HER2- breast cancer)



Proactive prophylaxis across all AEs and education is critical



Mucositis/stomatitis, nausea, and ocular events are key, mostly low-grade toxicities, to be aware of



Structured, multidisciplinary monitoring enables safe delivery, including early detection and management of uncommon but serious AEs such as interstitial lung disease (ILD)



OCULAR SURFACE EVENTS

PROPHYLAXIS Have patients start **preservative-free** artificial tears 4 times daily and avoid **contact lenses**.

MONITORING Refer patients to an eye care professional (optometrist or ophthalmologist) for an **ophthalmic exam** at treatment initiation, annually while on treatment, at end of treatment, and as clinically indicated. **Monitor patients** for ocular adverse reactions during treatment (ie, redness, pain, teary eyes, blurred vision). If present, promptly **refer patients to an eye care professional**.

MANAGEMENT Continue **preservative-free artificial tears 4 times daily throughout treatment** in addition to corticosteroid drops at the discretion of an ophthalmologist or eye care professional. Depending on grade, consider delay and reduce the dose or discontinue.



ORAL MUCOSITIS/STOMATITIS

PROPHYLAXIS Develop an oral care plan that includes a **corticosteroid-containing mouthwash** (eg, dexamethasone oral solution 0.1 mg/mL or alternative corticosteroid mouthwash advocated by institutional/local guidelines) and **good oral hygiene**. In the absence of a prophylactic steroid-containing mouthwash, daily use of inert, bland mouth rinses e.g., with a non-alcoholic and/or bicarbonate-containing mouthwash, 6 to 8 times a day) is recommended. Consider **prophylactic cryotherapy** (ie, ice chips or ice water held in the mouth throughout the infusion).

MONITORING Perform **regular oral exams** to detect sensitivity, inflammation, tenderness, and/or sores throughout treatment.

MANAGEMENT If oral mucositis/stomatitis occurs, **optimise prophylactic and supportive medications**, provide pain management with lidocaine-based mouthwash, treat sores with clobetasol gel; depending on grade, consider dose delay or reduction if clinically indicated.

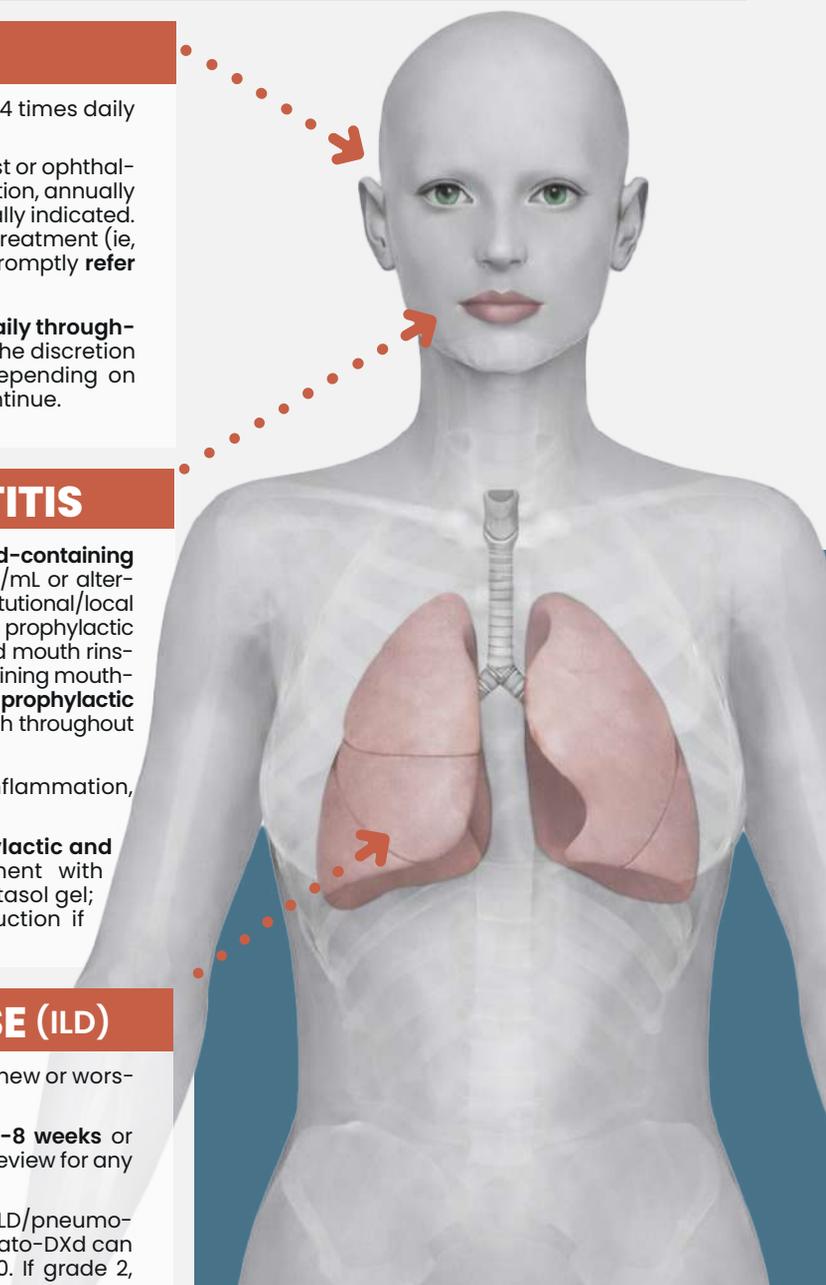


INTERSTITIAL LUNG DISEASE (ILD)

PATIENT COUNSELLING Educate patients to **report immediately** if they have new or worsening shortness of breath, chest pain, or cough.

MONITORING Perform **contrast-enhanced chest CT scan every 6-8 weeks** or according to institutional guidelines, and thoroughly review for any signs of ILD.

MANAGEMENT Administration of Dato-DXd must be delayed for any ILD/pneumonitis events regardless of grade. For Grade 1 events, Dato-DXd can be restarted only if the event is resolved to Grade 0. If grade 2, discontinue Dato-DXd.



AE, adverse event; CT, computed tomography; Dato-DXd, datopotamab deruxtecan; HER2-, human epidermal growth factor receptor 2 negative; HR+, hormone receptor positive; ILD, interstitial lung disease; NSCLC, non-small cell lung cancer

References: Lisberg A, et al. *Oncologist* 2025; 30:oyaf225. doi: 10.1093/oncolo/oyaf225; Meric-Bernstam F, et al. *Oncologist* 2025; 30:oyaf031. doi: 10.1093/oncolo/oyaf031

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Prophylaxis, clinical management, and monitoring of datopotamab deruxtecan-associated oral mucositis/stomatitis



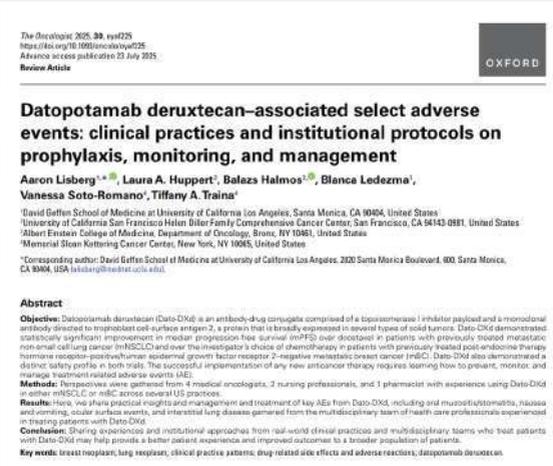
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Datopotamab deruxtecan-associated select adverse events: clinical practices and institutional protocols on prophylaxis, monitoring, and management

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Lisberg A, et al. The Oncologist 2025; 30: oyaf225



OVERVIEW

Review article focused on stomatitis, associated with Dato-DXd:

- Summarises **stomatitis incidence** observed in TROPION-Lung01, TROPION-Lung05, TROPION-Breast01 and TROPION-PanTumor01 trials
- Prophylactic recommendations include a daily oral care plan with **education for oral hygiene and hydration**, utilisation of a **steroid-containing mouthwash and cryotherapy**
- Reviews clinical management strategies to reduce severity and duration of stomatitis, with ongoing studies aiming to better prevention and treatment protocols to optimise patient outcome

OVERVIEW

Review article focused on toxicity management of AEs associated with Dato-DXd:

- Summarises AE incidence in Dato-DXd clinical trials
- Provides practical insights from a multidisciplinary HCP team on prophylaxis, monitoring and management of key AEs including oral mucositis/stomatitis, nausea and vomiting, ocular surface events and interstitial lung disease

