RITUXIMAB

BRAND NAME	RIXIMYO, TRUXIMA
DRUG CLASS	Non-cytotoxic antineoplastic, monoclonal antibody (chimeric)
AVAILABILITY	Vial contains 100 mg/10 mL or 500 mg/50 mL of rituximab. Also contains sodium citrate, polysorbate-80, sodium chloride, sodium hydroxide and hydrochloric acid.[1] Riximyo and Truxima are biosimilar products to Mabthera (discontinued). The solution is clear to opalescent and colourless to yellow.[1]
WARNING	The occupational hazard of intermittent low dose exposure to rituximab is not known. Wear a mask and gloves when preparing the infusion solution to minimise exposure. Rituximab is not a cytotoxic. Severe hypersensitivity and anaphylactic reactions may occur. Resuscitation facilities must be readily available.[1]
pH	6.5[1]
PREPARATION	Dilute the dose in glucose 5% or sodium chloride 0.9% to a concentration of 1–4 mg/mL. Mix gently. **Do not shake**.[1]
STABILITY	Vial: store at 2 to 8 °C. Do not freeze. Protect from light.[1] Riximyo is stable for 7 days below 30 °C.[1] **When prepared by pharmacy under aseptic conditions**: Infusion solution: use immediately or stable for up to 24 hours at 2 to 8 °C.[1]
ADMINISTRATION	
IM injection	Not recommended
SUBCUT injection	The IV formulation is not recommended for subcutaneous injection.[1]
IV injection	Not recommended[1]
IV infusion	For the first infusion, start at a rate of 50 mg/hour. If well tolerated, increase the rate by 50 mg/hour every 30 minutes to a maximum rate of 400 mg/hour. Subsequent infusions can be started at 100 mg/hour and increased by 100 mg/hour every 30 minutes to a maximum rate of 400 mg/hour.[1] For rheumatoid arthritis, if infusions are well tolerated a faster rate of 250 mg/hour for 30 minutes followed by 600 mg/hour for 90 minutes can be used (for doses of 1000 mg in 250 mL).[1] In patients being treated for lymphoma, faster infusion rates for subsequent cycles can be used.[2] Check your local guidelines. *continued over the page*

COMPATIBILITY Glucose 5%[1], sodium chloride 0.9%[1]

INCOMPATIBILITY Do not mix with other medicines

SPECIAL NOTES Monitor the patient during the infusion. Infusion reactions are common and include dyspnoea, bronchospasm, hypoxia, fever, chills, rigors, urticaria and angioedema. Stop or slow the infusion and treat accordingly. For mild to moderate infusion reactions, the infusion can be restarted at half the previous rate once symptoms have resolved.[1]

Severe hypersensitivity and anaphylactic reactions are a medical emergency. Stop the infusion and commence treatment immediately.

Give paracetamol and an antihistamine prior to rituximab. Also consider a corticosteroid.[1] Check your local guidelines.

Transient hypotension may occur. Consider withholding antihypertensive medication on the day of the infusion.[1]

REFERENCES

1. Product information. Available from www.tga.gov.au. Accessed 22/06/2022.
2. Resource: Rituximab rapid infusion [v4 October 2020].eviQ [internet]. Sydney: Cancer Institute NSW. Available from www.eviq.org.au. Accessed 22/06/2022.