יולי 2026

רופא/ה יקר/ה
רוקח/ת יקר/ה,

הנדון: **KEYTRUDA® 100 mg/4 mL**
קיטרודה 100 מ"ג/ 4 מ"ל

Dosage form and Composition:
Pembrolizumab 100 mg/4 ml; Concentrate for Solution for Intravenous Infusion

חברת מרק שארפ ודוהם (ישראל-1996) בע"מ, (MSD ישראל), מבקשת ליידע על עדכון העלון לרופא והעלון לצרכן של התכשיר Keytruda 100mg/4ml להכללת התוויה חדשה.

(טקסט שהוסף לעלון לרופא ולצרכן מודגש בקו תחתון)

עדכונים שבוצעו בעלון לרופא:

1 THERAPEUTIC INDICATIONS
[…]
1.20 Ovarian Cancer

KEYTRUDA, in combination with paclitaxel, with or without bevacizumab, is indicated for the treatment of adult patients with platinum-resistant epithelial ovarian, fallopian tube, or primary peritoneal carcinoma whose tumors express PD-L1 (CPS≥1) as determined by a validated test *[see Dosage and Administration (2.1)]*, and who have received one or two prior systemic treatment regimens.
[…]

2 Dosage and administration
2.1 Patient Selection
[…]
For use of KEYTRUDA in combination with paclitaxel, with or without bevacizumab, select patients based on the presence of positive PD-L1 expression (CPS ≥1) in platinum-resistant epithelial ovarian, fallopian tube, or primary peritoneal carcinoma [*see Clinical Studies (14.20)*].
[…]

2.21 Recommended Dosage for Ovarian cancer
The recommended dose of KEYTRUDA in adult patients is 400 mg every 6 weeks, administered as an intravenous infusion over 30 minutes until disease progression, unacceptable toxicity, or up to 24 months.

Administer KEYTRUDA prior to paclitaxel with or without bevacizumab when given on the same day. Refer to the Prescribing Information for the agents administered in combination with KEYTRUDA for recommended dosing information, as appropriate.
[…]

6 ADVERSE REACTIONS
[…]
6.1 Clinical Trials Experience
[…]
Ovarian Cancer

The safety of KEYTRUDA in combination with paclitaxel with or without bevacizumab was evaluated in 463 patients with epithelial ovarian, fallopian tube, or primary peritoneal carcinoma whose tumors express PD-L1 (CPS ≥1) enrolled in KEYNOTE-B96 *[see Clinical Studies (14.20)]*. Among patients who received KEYTRUDA, the median duration of exposure was 7.4 months (range: 1 day to 35.9 months).

Serious adverse reactions occurred in 54% of patients receiving KEYTRUDA and paclitaxel with or without bevacizumab. Serious adverse reactions in ≥2% of patients were pneumonia (4.3%), urinary tract infection (3.9%), adrenal insufficiency (3%), hyponatremia (3%), COVID-19 (2.6%), decreased neutrophil count (2.6%), pulmonary

embolism (2.6%), abdominal pain (2.1%), anemia (2.1%), colitis (2.1%), diarrhea (2.1%), febrile neutropenia (2.1%), pyrexia (2.1%) and vomiting (2.1%).

Fatal adverse reactions occurred in 3.9% of patients receiving KEYTRUDA and paclitaxel with or without bevacizumab, including assisted suicide (0.9%), death (0.4%), intestinal perforation (0.4%), sepsis (0.4%), COVID-19 (0.4%), cardio-respiratory arrest (0.4%), colitis (0.4%), and embolic stroke (0.4%).

KEYTRUDA was permanently discontinued for adverse reactions in 16% of patients. The most common adverse reactions resulting in permanent discontinuation of KEYTRUDA (≥1%) were colitis (1.3%), and increased alanine aminotransferase (1.3%). Adverse reactions leading to the interruption of KEYTRUDA occurred in 44% of patients. The most common adverse reactions leading to interruption of KEYTRUDA in ≥2% were urinary tract infection (3.9%), adrenal insufficiency (2.6%), pyrexia (2.6%), pneumonitis (2.6%), upper respiratory tract infection (2.6%), neutropenia (2.1%), diarrhea (2.1%) and COVID-19 (2.1%).

The most common (≥20%) adverse reactions for patients treated with KEYTRUDA in combination with paclitaxel with or without bevacizumab were: diarrhea (45%), fatigue (43%), nausea (41%), alopecia (38%), peripheral neuropathy (38%), epistaxis (31%), urinary tract infection (27%), constipation (25%), abdominal pain (24%), decreased appetite (24%), vomiting (24%), hypothyroidism (21%), cough (20%), hypertension (20%), and rash (20%). The most common (≥20%) laboratory abnormalities worsening from baseline were: anemia (85%), leukopenia (82%), decreased neutrophil count (71%), lymphopenia (60%), hypoalbuminemia (50%), hyponatremia (53%), hypomagnesemia (45%), increased aspartate aminotransferase (43%), increased alanine aminotransferase (40%), hypocalcemia (40%), increased alkaline phosphatase (31%), increased creatinine (29%), hypokalemia (27%) and neutropenia (21%).

For patients treated with KEYTRUDA in combination with paclitaxel and bevacizumab (N=169), decreased white blood cell count (27%), stomatitis (22%) and pyrexia (21%) were also reported as adverse reactions.

[…]

8.5 Geriatric Use
[…]

Of 643 adult patients with ovarian cancer who were treated with KEYTRUDA in combination with paclitaxel with or without bevacizumab in KEYNOTE-B96, 236 (37%) were 65 years and over and 58 (9%) were 75 years and over. No overall differences in safety or effectiveness were observed between patients ≥65 years of age and younger patients.

[…]

נוסף מידע גם בסעיף המפורט מטה:

14 CLINICAL STUDIES
[…]

14.20 Ovarian Cancer

עדכונים שבוצעו בעלון לצרכן:

1. למה מיועדת קיטרודה?
קיטרודה הינה תרופת מרשם המשמשת לטיפול ב:
[....]
- סרטן שחלה
  - ניתן להשתמש ב**קיטרודה** במבוגרים בשילוב עם התרופה הכימותרפית פקליטקסל, בשילוב או ללא התרופה בוואציזומאב, כאשר סרטן השחלה, סרטן החצוצרה או סרטן ראשוני של הצפק שלך:
    - עמיד בפני כימותרפיה המכילה פלטינום, **ו**
    - הינו חיובי ל- "PD-L1", **ו**
    - קיבלת סוג אחד או שני סוגי טיפול קודמים

[...]

4. תופעות לוואי
[...]
תופעות הלוואי הבאות דווחו עם קיטרודה כאשר ניתנת בשילוב עם תרופות כימותרפיות ובוואציזומאב:

תופעות לוואי שכיחות מאד (דווחו ב- 20% או יותר מהמטופלים)

- ספירה נמוכה של תאי דם אדומים
- ספירה נמוכה של תאי דם לבנים
- ספירה נמוכה של טסיות
- רמות נמוכות של הורמון בלוטת התריס
- בחילה
- שלשול
- עצירות
- הקאה
- הרגשת עייפות או חולשה
- זיהום בדרכי השתן
- ירידה בתיאבון
- כאב במפרק
- עקצוץ, או חוסר תחושה של הידיים או הרגליים
- נשירת שיער
- פריחה
- לחץ דם גבוה
- חום
- פצעים בפה
- דימום מהאף
- כאב באזור הבטן
- שיעול
- תוצאות לא תקינות של בדיקות מעבדה

[...]

בעלון לרופא ובעלון לצרכן בוצעו עידכונים נוספים שאינם נכללים בהודעה זו. למידע מלא ולהוראות מתן מפורטות, יש לעיין בעלון לרופא המאושר על ידי משרד הבריאות. העלון לרופא נשלח לפרסום במאגר התרופות שבאתר משרד הבריאות, וניתן לקבלו מודפס על ידי פניה לבעל הרישום, חברת MSD, בטלפון 09-9533333.

Keytruda 100mg/4ml מופצת ע"י חברת נובולוג בע"מ.

דיווח על תופעות לוואי לתכשירים רשומים הינו חשוב ומאפשר המשך מעקב אחר מאזן התועלת/סיכון של התכשיר. ניתן לדווח על תופעות לוואי למשרד הבריאות באמצעות לחיצה על הקישור "דיווח על תופעות לוואי עקב טיפול תרופתי" שנמצא בדף הבית של אתר משרד הבריאות (www.health.gov.il) המפנה לטופס המקוון לדיווח על תופעות לוואי, או ע"י כניסה לקישור: https://sideeffects.health.gov.il .
כמו כן ניתן לדווח על תופעות לוואי לחברת MSD ישראל באמצעות פנייה טלפונית ל-09-9533333.

בברכה,

שלי ישי
רוקחת ממונה
MSD ישראל

References:
Keytruda_100mg_4ml-SPC-07_2026_clean
Keytruda_100mg_4ml-PIL-HEB-07_2026_clean

ההתוויות המאושרות לתכשיר:

Melanoma

- KEYTRUDA is indicated for the treatment of adult and pediatric (12 years and older) patients with unresectable or metastatic melanoma.
- KEYTRUDA is indicated for the adjuvant treatment of adult and pediatric (12 years and older) patients with Stage IIB, IIC, or III melanoma following complete resection.

Non-Small Cell Lung Cancer

- KEYTRUDA, in combination with pemetrexed and carboplatin, is indicated for the first-line treatment of patients with metastatic nonsquamous non-small cell lung cancer (NSCLC) negative for EGFR or ALK genomic tumor aberrations.
- KEYTRUDA, in combination with carboplatin and either paclitaxel or paclitaxel protein-bound, is indicated for the first-line treatment of patients with metastatic squamous NSCLC.
- KEYTRUDA, as a single agent, is indicated for the treatment of patients with metastatic NSCLC whose tumors express PD-L1 [Tumor Proportion Score (TPS) ≥50%)] as determined by a validated test. Patients with EGFR or ALK genomic tumor aberrations should have disease progression on or after platinum-containing chemotherapy and an approved therapy for these aberrations prior to receiving KEYTRUDA.
- KEYTRUDA, as a single agent, is indicated for the treatment of patients with advanced NSCLC whose tumors express PD-L1 as determined by a validated test, with disease progression on or after platinum containing chemotherapy. Patients with EGFR or ALK genomic tumor aberrations should have disease progression on approved therapy for these aberrations prior to receiving KEYTRUDA.
- KEYTRUDA, as a single agent, is indicated as adjuvant treatment following resection and platinum-based chemotherapy for adult patients with Stage IB (T2a ≥4 cm), II, or IIIA NSCLC.
- KEYTRUDA, in combination with platinum-containing chemotherapy as neoadjuvant treatment, and then continued as monotherapy as adjuvant treatment, is indicated for the treatment of resectable NSCLC at high risk of recurrence in adults (for selection criteria, see section "Clinical Studies" (14).

Head and Neck Cancer

- KEYTRUDA is indicated for the treatment of adult patients with resectable locally advanced stage III-IV HNSCC whose tumors express PD-L1 [Combined Positive Score (CPS) ≥1] as determined by a validated test, as a single agent as neoadjuvant treatment, continued as adjuvant treatment in combination with radiotherapy (RT) with or without cisplatin and then as a single agent. For Patient with CPS 1-9 see sections "Dosage and Administration" (2.1) and "Clinical Studies" (14.4).
- KEYTRUDA, in combination with platinum and fluorouracil (FU), is indicated for the first-line treatment of patients with metastatic or with unresectable, recurrent head and neck squamous cell carcinoma (HNSCC).
- KEYTRUDA, as a single agent, is indicated for the first-line treatment of patients with metastatic or with unresectable, recurrent HNSCC whose tumors express PD-L1 [Combined Positive Score (CPS) ≥1] as determined by a validated test.
- KEYTRUDA, as a single agent, is indicated for the treatment of patients with recurrent or metastatic HNSCC with disease progression on or after platinum-containing chemotherapy.

Classical Hodgkin Lymphoma

- KEYTRUDA is indicated for the treatment of adult patients with relapsed or refractory classical Hodgkin lymphoma (cHL).
- KEYTRUDA is indicated for the treatment of pediatric patients with refractory cHL, or cHL that has relapsed after 2 or more lines of therapy.

Primary Mediastinal large B-Cell Lymphoma

KEYTRUDA is indicated for the treatment of adult and pediatric patients with refractory primary mediastinal large B-cell lymphoma (PMBCL), or who have relapsed after 2 or more prior lines of therapy.
Limitation of Use: KEYTRUDA is not recommended for treatment of patients with PMBCL who require urgent cytoreductive therapy.

Urothelial Cancer

- KEYTRUDA, as a single agent, is indicated for the treatment of patients with locally advanced or metastatic urothelial carcinoma who are not eligible for cisplatin-containing chemotherapy and whose tumors express PDL1 (CPS ≥10) as determined by a validated test, or in patients who are not eligible for any platinum-containing chemotherapy regardless of PD-L1 status.

- KEYTRUDA, as a single agent, is indicated for the treatment of patients with locally advanced or metastatic urothelial carcinoma who have disease progression during or following platinum-containing chemotherapy or within 12 months of neoadjuvant or adjuvant treatment with platinum-containing chemotherapy.
- KEYTRUDA, as a single agent, is indicated for the treatment of patients with Bacillus Calmette-Guerin (BCG) unresponsive, high-risk, non-muscle invasive bladder cancer (NMIBC) with carcinoma in situ (CIS) with or without papillary tumors who are ineligible for or have elected not to undergo cystectomy.
- KEYTRUDA, in combination with enfortumab vedotin, is indicated for the first-line treatment of adult patients with unresectable or metastatic urothelial cancer.

Microsatellite Instability-High Cancer

KEYTRUDA is indicated for the treatment of adult and pediatric patients with unresectable or metastatic, microsatellite instability-high (MSI H) or mismatch repair deficient (dMMR).

- solid tumors that have progressed following prior systemic treatment and who have no satisfactory alternative treatment options,

or

- colorectal cancer that has progressed following treatment with a fluoropyrimidine, oxaliplatin, and irinotecan.

Limitation of Use: The safety and effectiveness of KEYTRUDA in pediatric patients with MSI H central nervous system cancers have not been established.

Gastric Cancer

- KEYTRUDA, in combination with trastuzumab, fluoropyrimidine and platinum-containing chemotherapy, is indicated for the first-line treatment of locally advanced unresectable or metastatic HER2-positive gastric or gastro-oesophageal junction (GEJ) adenocarcinoma in adults whose tumors express PD-L1 with a CPS ≥1 as determined by a validated test.
- KEYTRUDA, in combination with fluoropyrimidine- and platinum-containing chemotherapy, is indicated for the first-line treatment of adults with locally advanced unresectable or metastatic HER2-negative gastric or gastroesophageal junction (GEJ) adenocarcinoma whose tumors express PD-L1 with a CPS ≥1 as determined by a validated test.

Cervical Cancer

- KEYTRUDA, in combination with chemoradiotherapy (CRT), is indicated for the treatment of patients with FIGO 2014 Stage III-IVA cervical cancer.
- KEYTRUDA, in combination with chemotherapy, with or without bevacizumab, is indicated for the treatment of patients with persistent, recurrent, or metastatic cervical cancer whose tumors express PD-L1 (CPS ≥1) as determined by a validated test.
- KEYTRUDA, as a single agent, is indicated for the treatment of patients with recurrent or metastatic cervical cancer with disease progression on or after chemotherapy whose tumors express PD-L1 (CPS ≥1) as determined by a validated test.

Biliary Tract Cancer

KEYTRUDA, in combination with gemcitabine and cisplatin, is indicated for the treatment of patients with locally advanced unresectable or metastatic biliary tract cancer (BTC).

Merkel Cell Carcinoma

KEYTRUDA is indicated for the treatment of adult and pediatric patients with recurrent locally advanced or metastatic Merkel cell carcinoma (MCC).

Renal Cell Carcinoma

- KEYTRUDA, in combination with axitinib, is indicated for the first-line treatment of adult patients with advanced renal cell carcinoma (RCC).
- KEYTRUDA, in combination with lenvatinib, is indicated for the first-line treatment of adult patients with advanced RCC.
- KEYTRUDA is indicated for the adjuvant treatment of patients with RCC at intermediate-high or high risk of recurrence following nephrectomy, or following nephrectomy and resection of metastatic lesions.

Esophageal Cancer

- KEYTRUDA is indicated for the treatment of patients with locally advanced or metastatic esophageal or gastroesophageal junction (GEJ) (Siewert type I) carcinoma that is not amenable to surgical resection or definitive chemoradiation in combination with platinum- and fluoropyrimidine-based chemotherapy.

- KEYTRUDA is indicated for the treatment of patients with recurrent locally advanced or metastatic squamous cell carcinoma of the esophagus whose tumors express PD-L1 (CPS ≥10) as determined by a validated test, with disease progression after one or more prior lines of systemic therapy.

Cutaneous Squamous Cell Carcinoma
KEYTRUDA is indicated for the treatment of patients with recurrent or metastatic cutaneous squamous cell carcinoma (cSCC) or locally advanced cSCC that is not curable by surgery or radiation.

Microsatellite Instability-High or Mismatch Repair Deficient Colorectal Cancer (CRC)
KEYTRUDA is indicated for the first-line treatment of patients with unresectable or metastatic MSI-H or dMMR colorectal cancer (CRC).

Tumor Mutational Burden-High Cancer
KEYTRUDA is indicated for the treatment of adult and pediatric patients with unresectable or metastatic tumor mutational burden-high (TMB-H) [≥10 mutations/megabase (mut/Mb)] solid tumors, as determined by a validated test, that have progressed following prior treatment and who have no satisfactory alternative treatment options.
Limitations of Use: The safety and effectiveness of KEYTRUDA in pediatric patients with TMB-H central nervous system cancers have not been established.

Triple Negative Breast Cancer
- KEYTRUDA, in combination with chemotherapy, is indicated for the treatment of patients with locally recurrent unresectable or metastatic triple negative breast cancer (TNBC) whose tumors express PD-L1 (CPS ≥10) as determined by a validated test.
- KEYTRUDA is indicated for the treatment of patients with high risk early stage triple negative breast cancer (TNBC) in combination with chemotherapy as neoadjuvant treatment, and then continued as a single agent as adjuvant treatment after surgery.

Endometrial carcinoma
- KEYTRUDA, in combination with carboplatin and paclitaxel, followed by KEYTRUDA as a single agent, for the treatment of adult patients with primary advanced or recurrent pMMR endometrial carcinoma at least 12 months from prior adjuvant chemotherapy, and dMMR endometrial carcinoma regardless of prior adjuvant treatment.
- KEYTRUDA, in combination with lenvatinib, is indicated for the treatment of advanced or recurrent endometrial carcinoma in adults who have disease progression on or following prior treatment with a platinum containing therapy and who are not candidates for curative surgery or radiation.

Malignant Pleural Mesothelioma
KEYTRUDA, in combination with pemetrexed and platinum chemotherapy, is indicated for the first line treatment of adults with unresectable non-epithelioid malignant pleural mesothelioma.

Ovarian cancer
KEYTRUDA, in combination with paclitaxel, with or without bevacizumab, is indicated for the treatment of adult patients with platinum-resistant epithelial ovarian, fallopian tube, or primary peritoneal carcinoma whose tumors express PD-L1 (CPS ≥1) as determined by a validated test, and who have received one or two prior systemic treatment regimens.