ZYNLONTA® (loncastuximab tesirine-lpyl) – Infusion Line of Administration

Summary

- ZYNLONTA is administered as an intravenous (IV) infusion over 30 minutes using a dedicated infusion line equipped with a sterile, non-pyrogenic, low-protein binding in-line or add-on filter (0.2- or 0.22-micron pore size) and catheter.[4]
- Extravasation of ZYNLONTA may be associated with local irritation, swelling, pain, or tissue damage. For patients who have a central line, administration of ZYNLONTA via this central line should be considered.[3]
- ADC Therapeutics does not make recommendations regarding the administration of ZYNLONTA utilizing any method outside of the Prescribing Information. Please defer to your clinical judgment when selecting a peripheral or central line for the administration of ZYNLONTA. See Relevant Prescribing Information for additional information.

Background

- According to the Michigan Appropriateness Guide for Intravenous Catheters (MAGIC) by Chopra et al., peripherally inserted central catheters (PICCs) are appropriate for patients requiring intravenous therapy for several weeks to 6 months.[1]
- Midline catheters are not recommended for the administration of vesicant or highly irritating drugs due to the risk of vein irritation or tissue damage from extravasation.[1]
- Consideration of the appropriate vascular access is crucial for the prevention of extravasation. Patients who do not have adequate peripheral venous access should have a central venous catheter placed.[2]

Table 1: Types and Uses of Current Prevailing Venous Access Devices. Adopted from Chopra V et al.[1]

Type of Device	When to Use	When to Avoid
Central devices		
PICC	For medium-term access (up to 6 months) and especially for antibiotics, TPN, chemotherapy, transfusions, and frequent blood sampling.	When long-term (or permanent) access is required. Not recommended for dialysis (or predialysis) patients.
Non-tunneled central catheter	For short-term access when PIV is not suitable, particularly in emergencies, resuscitation or for central venous pressure monitoring.	When access is required for more than a few days (use a tunneled catheter instead).
Tunneled central catheter	For long-term frequent access, especially for TPN, transfusions, and frequent blood sampling. Suitable when PICC is contraindicated or not feasible.	When short-term access is needed (consider an implantable port for less frequent access).
Implantable port	For infrequent long-term access or when lifestyle considerations favor a fully implanted device.	When frequent venous access is required (frequent needle access may cause discomfort).
Peripheral devices		
PIV	For short-term access (up to 96 hours).	When access is needed for more than a few days or if irritant medications are required.
Midline catheter	Recommended for intermediate-duration IV therapy (typically up to 2–4 weeks) when PICC placement is not necessary.	When access is needed for longer than 1 month or when vesicant medications are involved.

PICC—peripherally inserted central catheter, PIV—peripheral intravenous, TPN—total parenteral nutrition

Clinical Data

The following information in the Clinical Data section were directions provided to clinical investigators and are not recommendations from the Prescribing Information.

Administration of ZYNLONTA[3]

- Prime the IV administration set and IV filter set.
- For patients with a central line, administration of ZYNLONTA via this central line was considered.
- If an indwelling venous access device is used, when possible, ZYNLONTA will be administered via a different lumen than used for blood collections.
- ZYNLONTA is to be infused from the IV bag with a low protein binding 0.2-micron filter through tubing using a metering pump and must be administered for at least 30 minutes.
- The infusion is to continue until the amount of ZYNLONTA in the IV bag is completely delivered. The tubing should be flushed with D5W according to local institutional guidelines/policies to ensure the full dose of ZYNLONTA is delivered.

Line of Administration for Prevention of Extravasation[3]

- Extravasation of ZYNLONTA may be associated with local irritation, swelling, pain, or tissue damage. The IV infusion site should be monitored for signs of IV infiltration or drug extravasation, and patients should be instructed to report immediately any signs of IV infiltration or drug extravasation during or after the infusion.
- Suspected extravasation of ZYNLONTA should be managed according to institutional protocol for management of extravasation of cytotoxic chemotherapy. For patients who have a central line, administration of ZYNLONTA via this central line should be considered.

Literature Search

- A PubMed biomedical literature search conducted on April 4, 2025, yielded no further relevant data regarding infusion line of administration for ZYNLONTA.

Relevant Prescribing Information

Section 2: Dosage and Administration[4]

2.4: Reconstitution and Administration Instructions

Administration

- Administer by intravenous infusion over 30 minutes using a dedicated infusion line equipped with a sterile, non-pyrogenic, low-protein binding in-line or add-on filter (0.2- or 0.22-micron pore size) and catheter.
- Extravasation of ZYNLONTA has been associated with irritation, swelling, pain, and/or tissue damage, which may be severe [see Adverse Reactions (6.1)]. Monitor the infusion site for possible subcutaneous infiltration during drug administration.
- Do not mix ZYNLONTA with or administer as an infusion with other drugs.

References

[1] Chopra V, Flanders SA, Saint S, et al The Michigan Appropriateness Guide for Intravenous Catheters (MAGIC): results from a multispecialty panel using the RAND/UCLA appropriateness method. *Ann Intern Med.* 2015;163(6 Suppl): S1-S40. Available from: https://www.acpjournals.org/doi/10.7326/M15-0744
[2] Kreidieh FY, Moukadem HA, El Saghir NS. Overview, prevention and management of chemotherapy extravasation. *World J Clin Oncol*. 2016;7(1):87-97. doi:10.5306/wjco.v7.i1.87
[3] Data on File, Pharmacy Manual. ADC Therapeutics.
[4] ZYNLONTA® (loncastuximab tesirine-lpyl) FDA-approved Prescribing Information. October 2022.

ADC Therapeutics encourages all health care professionals to report any adverse events and product quality complaints to medical information at 855-690-0340. Please consult the ZYNLONTA Prescribing Information.