FAST FACTS:
SIPONIMOD AND *CYP2C9* GENOTYPING

Pre-emptive pharmacogenomic testing has been proven to reduce adverse drug reactions.

Siponimod (Kiendra™) is now registered in South Africa for the treatment of secondary progressive multiple sclerosis (SPMS). Siponimod is contraindicated in patients with the *CYP2C9* *3/*3 genotype (poor metabolisers). Dosage adjustment is required for the *CYP2C9* *1/*3 and *2/*3 (intermediate metaboliser) genotypes. SPMS patients therefore require *CYP2C9* genotyping prior to initiating siponimod therapy.

CYP2C9/Siponimod genotype-based dosing guidelines*

Poor metaboliser	Intermediate metaboliser	Normal metaboliser
CYP2C9 *3/*3	*CYP2C9* *1/*3 *CYP2C9* *2/*3	*CYP2C9* *1/*1 *CYP2C9* *1/*2 *CYP2C9* *2/*2
Siponimod is contraindicated due to substantially elevated plasma levels	Reduced maintenance dose of Siponimod recommended (1mg)	Normal maintenance dose of Siponimod recommended (2mg)

*Source: Siponimod package insert

- *CYP2C9* genotyping is now available at Ampath.
- *CYP2C9* genotyping is performed as part of our comprehensive pharmacogenomics panel (Test Mnemonic: **PHARMA**).
- Results are available within 10 working days.

For more information please contact: pgx@ampath.co.za

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