

Oral Etoposide Therapy

INDICATIONS FOR USE:

INDICATION	ICD10	Regimen Code	*Reimbursement Status
Small cell lung cancer (SCLC) extensive disease in patients unsuitable for intravenous or combination chemotherapy	C34	00388a	CDS

**If the reimbursement status is not defined¹, the indication has yet to be assessed through the formal HSE reimbursement process.*

TREATMENT:

The starting dose of the drugs detailed below may be adjusted downward by the prescribing clinician, using their independent medical judgement, to consider each patient's individual clinical circumstances.

There are a number of different regimens for oral etoposide for this indication as outlined in the treatment table below. Treatment is continued until disease progression or unacceptable toxicity develops.

Day	Drug	Dose	Route	Cycle
1-7	Etoposide	50 mg bd	PO	Every 21 days
OR				
1-3	Etoposide	100 mg/m ² BD	PO	Every 21 days
OR				
1-21	Etoposide	50 mg/m ² daily	PO	Every 21 days
Etoposide is available in 50mg and 100mg capsules The capsules should be taken on an empty stomach				

ELIGIBILITY:

- Indications as above
- ECOG 0-3

EXCLUSIONS:

- Hypersensitivity to etoposide or any of the excipients
- Pregnancy
- Lactation

PRESCRIPTIVE AUTHORITY:

The treatment plan must be initiated by a Consultant Medical Oncologist

TESTS:

Baseline tests:

- FBC, liver and renal profile

Regular tests:

- FBC, liver and renal profile

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Disease monitoring:

Disease monitoring should be in line with the patient’s treatment plan and any other test/s as directed by the supervising Consultant.

DOSE MODIFICATIONS:

- Any dose modification should be discussed with a Consultant.

Haematological:

Table 1: Dose modification of etoposide in haematological toxicity

ANC (x10 ⁹ /L)		Platelets (x10 ⁹ /L)	Dose
≥1.5	and	≥100	100%
1-1.49	or	75-99	75%
<1	or	<75	DELAY

Renal and Hepatic Impairment:

Table 2: Dose modification of etoposide in renal and hepatic impairment

Renal Impairment		Hepatic Impairment			
Cr Cl (ml/min)	Dose	Bilirubin (micromole/L)		AST (units/L)	Dose
>50	100%	26-51	Or	60-180	50%
15-50	75%	>51	Or	>180	Clinical decision

Subsequent dosing should be based on patient tolerance and clinical effect. Data are not available in patients with creatinine clearance < 15ml/min and further dose reductions should be considered in these patients.

SUPPORTIVE CARE:

EMETOGENIC POTENTIAL: Low (Refer to local policy).

PREMEDICATIONS:

None

OTHER SUPPORTIVE CARE:

No specific recommendations

ADVERSE EFFECTS / REGIMEN SPECIFIC COMPLICATIONS

The adverse effects listed are not exhaustive. Please refer to the relevant Summary of Product Characteristics for full details.

- **Neutropenia:** Fever or other evidence of infection must be assessed promptly and treated appropriately

DRUG INTERACTIONS:

- CYP3A4 inducers may increase the clearance of etoposide.
- CYP3A4 inhibitors may decrease the clearance of etoposide
- Current drug interaction databases should be consulted for more information.

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ATC CODE:

Etoposide L01CB01

REFERENCES:

1. Einhorn LH, Pennington K, McClean J. Phase II trial of daily oral VP-16 in refractory small cell lung cancer. *Semin Oncol* 1990; 17:32-35.
2. Johnson DH, Greco FA, Strupp J, et al. Prolonged administration of oral etoposide in patients with relapsed or refractory small-cell lung cancer: a phase II trial. *J Clin Oncol* 1990; 8:1613-1617.
3. Keane M, Carney DN. Treatment of elderly patients with small cell lung cancer. *Lung Cancer*, 1993; 9: S91-S98
4. Vepesid100mg soft capsules Summary of Product Characteristics Accessed Nov 2018 Available at https://www.hpra.ie/img/uploaded/swedocuments/LicenseSPC_PA0048-022-001_20032018152102.pdf

Version	Date	Amendment	Approved By
1	20/12/2016		Prof Maccon Keane
2	16/01/2019	Updated to new NCCP template	Prof Maccon Keane

Comments and feedback welcome at oncologydrugs@cancercontrol.ie.

ⁱ ODMS – Oncology Drug Management System

CDS – Community Drug Schemes (CDS) including the High Tech arrangements of the PCRS community drug schemes

Further details on the Cancer Drug Management Programme is available at;

<http://www.hse.ie/eng/services/list/5/cancer/profinfo/medonc/cdmp/>

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