INTERFERON ALFA

For use in advanced renal cell carcinoma

Drugs/Dosage:	Roferon-A	initiate treatment with 3MU s/c 3 times weekly for at least one week, then increase to 6MU s/c 3 times weekly, then if tolerated at above doses, increase to 9MU s/c 3 times weekly
	Doses may need to be reviewed and adjusted according to patient tolerability.	
Other Drugs:	Paracetamol 500 - 1000mg 1 hour before first injection, then up to qds as needed to manage flu-like symptoms Anti-depressant may be required if depression occurs with long-term use	
Administration:	Subcutaneous bolus injection into the thigh or abdomen. The patient (or family member) will need to be trained to self-inject. Roferon-A is available in 0.5ml single dose pre-filled syringes, at doses of 3MU, 4.5MU, 6MU and 9 MU. Ensure that the patient has a cin-bin for disposal of syringes.	
Frequency:	treat for at least 3 months, up to a maximum of 12 months or until development of progressive disease. If CR achieved, continue with interferon for a further 3 months after CR.	
Main Toxicities:	flu-like symptoms; fatigue; mild neutropenia; (tolerance is acquired after about 2 weeks, but symptoms will return if treatment is stopped and restarted); depression or anorexia may occur with long-term use	
Anti- emetics:	mildly emetogenic – domperidone may be required	
Regular Investigations:	FBC	baseline, then every 2 weeks for 4 – 6 weeks, then as indicated
	U&Es	baseline, then as indicated
	LFTs	baseline, then as indicated

Dose Modifications

Haematological Toxicity:	Interferon has a suppressive effect on the bone marrow, leading to a fall in the white blood count, particularly granulocytes, platelet count and, less commonly, haemoglobin concentration. Blood counts should be performed at appropriate periods during therapy. If considered necessary, interferon therapy should be temporarily withdrawn, in which case recovery of haematological deviations due to interferon should occur within seven to ten days.
Renal or Hepatic Impairment:	Contra-indicated in severe renal or severe hepatic impairment

Reason for Update: Roferon pen discontinued; metoclop → domperidone	Approved by Consultant: Dr A Michael
Version: 3	Approved by Lead Chemotherapy Nurse: P Deery
Supersedes: Version 2	Date: 3.10.13
Prepared by: S Taylor	Checked by: C Tucker