TOPOTECAN (ORAL)

A possible treatment for patients with relapsed small cell lung cancer, and other primary tumours with small cell histology, if re-challenge with first-line treatment (usually carbo/etop) is not appropriate and there is a medical reason why they cannot have the CAV regimen (NICE approved 2009)

Funding approved for third line treatment for topotecan-naive patients who did not access topotecan as 2nd line therapy

Drug / Dosage:	Topotecan	2.3mg/m^2/day	PO once daily on Days 1 - 5 (5 doses in total per cycle)

Administration: Oral topotecan is available as 0.25mg and 1mg capsules, which need to be stored in the fridge. Capsules are to be swallowed whole. They may be taken with or without food.

Frequency: 3 weekly cycle (from Day 1) for up to 6 cycles, or to disease progression

Main Toxicities: myelosuppression; stomatitis; alopecia; diarrhoea

Anti – emetics: mildly emetogenic

Regular investigations:	FBC	Day 1
	U&Es	Day 1
	LFTs	Day 1
	EDTA	consider only if C&G predicts CrCl < 50ml/min
	CT scan	after Cycle 2

Comments: EDTA should be repeated if there is a 30% change in serum creatinine.

Proactive management of diarrhoea with anti-diarrhoeal agents is important. Ensure patient has a supply of loperamide.

Dose Modifications

Haematological Toxicity:

Pre Cycle 1:
Patient must have baseline neutrophils ≥ 1.5 x 10^9/l and platelets ≥ 100 x 10^9/l

Subsequent cycles:

Neutrophils < 1.0 x 10^9/l or Platelets < 100 x 10^9/l	Delay treatment for 1 week and repeat FBC. If within normal parameters, proceed with treatment, adjusting doses if necessary as indicated below.

The following patients should have dosage reduced to 1.9mg/m^2/day (or subsequently down to 1.5mg/m^2/day, if necessary):

Patients who experience:
neutrophils < 0.5 x 10^9/l for 7 days or more **or** severe neutropenia with fever or infection
or have had treatment delayed due to neutropenia
or platelets < 25 x 10^9/l at any point after treatment
or Grade 3 – 4 diarrhoea or other non-haematological toxicity

Reason for Update: 3rd line indication added	Approved by Consultant: Dr V Ezhil
Version: 4	Approved by Lead Chemotherapy Nurse: P Deery
Supersedes: Version 3	Date: 11.5.15
Prepared by: S Taylor	Checked by: C Tucker

Renal Impairment:

CrCl (ml/min)	Topotecan Dose
≥50	2.3mg/m^2/day for 5 days
30 - 49	1.9mg/m^2/day for 5 days (if well tolerated, may be increased to 2.3mg/m^2/day on subsequent cycles)
< 30	Not recommended

Hepatic Impairment: No dose adjustments required if bilirubin < 170 µmol/l.

Reference: O'Brien, M et al; JCO 2006; 24 (34): 5441 – 5447