VISMODEGIB

For metastatic or locally advanced basal cell carcinoma inappropriate for surgery or radiotherapy
Individual funding must be obtained before treatment may start

Drug/Dosage:	**Vismodegib**	150mg po once daily continuous therapy
Administration:	Available as 150mg capsules, which should be swallowed whole with water, either with or without food.	
Frequency:	continue for as long as there is clinical benefit, or unacceptable toxicity.	
Main Toxicities:	muscle spasms; alopecia; GI disturbances; taste disturbances; increased LFTs; rash; weight loss; fatigue; teratogenicity (see Comments)	
Anti- emetics:	mildly emetogenic	
Regular: Investigations:	FBC	baseline, after 4 weeks, then every 3 – 6 months
	LFTs	baseline, after 4 weeks, then every 3 – 6 months or as indicated *
	U&Es	baseline, after 4 weeks, then every 3 – 6 months
	Skin evaluation	for development of any cutaneous scc – regularly throughout treatment
	Pregnancy test	baseline, then every month, for women of child-bearing potential

* an increase in hepatic enzymes with vismodegib was commonly reported in clinical trials. In the event of any raised LFTs, more frequent monitoring of LFTs is recommended

Comments:

Vismodegib is teratogenic:
Women of child bearing potential must have a negative pregnancy test within 7 days prior to starting treatment. Pregnancy testing should be repeated monthly thereafter during treatment with vismodegib.

Women of child-bearing potential must use two agreed effective methods of contraception while on vismodegib and for 24 months after the final dose.

Men taking vismodegib must use a barrier method of contraception throughout treatment and for 2 months after the final dose.

Vismodegib is supplied via a pregnancy prevention programme:

- all patients need to be provided with the Pregnancy Prevention Programme booklet before starting treatment, and they must understand and acknowledge all the conditions relevant to them.

- The prescriber must comply with the conditions of the pregnancy prevention programme, including completion of the Verification of Counselling Form (VCF) for new patients;
  go to www.erivedge-ppp.co.uk
  login: pppportal
  username: vismodegib

Reason for Update: more detail about the pregnancy prevention programme, updated renal, hepatic and interactions sections, removed need to avoid grapefruit	Approved by Consultant: Dr R Shaffer
Version: 2	Approved by Lead Chemotherapy Nurse: Paula Deery
Supersedes: Version 1	Date: 28.5.15
Prepared by: S Taylor	Checked by: C Tucker

- The dispensing pharmacist must comply with the conditions of the pregnancy prevention programme, including completion and submission of the "Pharmacist Dispensing Checklist" at each dispensing event.

Interactions: Elimination of vismodegib is mainly through hepatic metabolism:

- clinically significant interactions between vismodegib and CYP450 enzyme inhibitors are not expected.
- concomitant use of enzyme inducers (e.g. rifampicin, phenytoin, carbamazepine, St John's wort) with vismodegib may result in reduced exposure to vismodegib, and so increase the risk of therapeutic failure.

Dose Modifications**:** No dose adjustments are recommended.

Hepatic Impairment: No dose adjustment is required for patients with mild, moderate or severe hepatic impairment.

Renal Impairment: No dose adjustment is needed if CrCl ≥ 30ml/min. Very limited data is available in patients with CrCl < 30ml/min. Patients with severe renal impairment should be carefully monitored for adverse reactions.