

## HYDROXYCARBAMIDE

**INDICATION:** Essential thrombocytopenia, polycythaemia vera, CML, hyperleucocytosis in acute leukaemia

### Prior to a course of treatment

- Check FBC, U&Es, creat, LFTs
- Discuss the need for contraception with both male and female patients. Discuss risk of infertility - offer semen cryopreservation to male patients
- Written consent for course

### Prior to each prescription

- Medical review of fitness for chemotherapy – exclude active infection, major changes in organ function
- Check FBC

Hydroxycarbamide      500mg – 4g daily      given in one or two daily doses

**Dose, duration and interval between prescriptions varies according to indication**

\* available as 500mg capsules

**Prophylaxis for acute & delayed emesis**      None required

**Other medications**      Consider allopurinol

### Dose modifications for haematological toxicity (unless considered due to marrow infiltration)

- Dose adjusted according to response and haematological toxicity

### Dose modification for renal failure

- |                                      |           |
|--------------------------------------|-----------|
| • Creatinine clearance >50ml/min     | 100% dose |
| • Creatinine clearance 10 - 50ml/min | 50% dose  |
| • Creatinine clearance <10ml/min     | 20% dose  |

### Dose modification for liver dysfunction

- Limited information – clinical decision

### Hydroxycarbamide toxicities

Neutropenic sepsis & thrombocytopenia	Anaemia
Rash	Leg ulcers
Cutaneous vasculitis and leg ulcers	Hydroxyurea-induce dermatopathy
Hyperuricaemia and tumour lysis syndrome	Macrocytosis

Note potential interaction with anti-retroviral drugs causing pancreatitis, hepatotoxicity, neuropathy

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