Lancashire and South Cumbria Cancer Network

Chemotherapy protocol

Drug Regimen
Sunitinib (Sutent)

Indications
Advanced well differentiated Pancreatic Neuroendocrine Tumour

Eligibility
Histologically proven advanced Pancreatic Neuroendocrine Tumour, well differentiated, with evidence of disease progression, not treatable with curative intent. Ki67 levels can be above 5%.
PS 0-2

Exclude
- Pregnancy
- Uncontrolled hypertension
- Significant ischaemic heart disease

Investigations

Baseline:	FBC, U&E's, LFT's, urine analysis, **BP**, TFT's.
Pre-treatment cycle:	FBC, U&Es, LFT's, urine analysis, uric acid, TSH, **BP.** Muga scan if clinically indicated.

Regimen

Sunitinib	37.5mg orally once daily, continuous daily dosing

Concomitant somatostatin analogues are allowable.

Dose Modifications Criteria

Haematological:
Ensure: WBC >3.0 x 10^9
Neutrophils > 1.5 x 10^9
Platelets >100 x 10^9
If not delay until recovery

Non Haematological toxicity:
Grade 3/4. Delay until grade 1. Seek medical advice from consultant.

Cardiac toxicity: Seek medical advice

Hypertension: Stop if: > 200mmHg systolic
> 110mmHg diastolic

Seek medical advice if raised from base-line

Side Effects

Fatigue, anorexia, diarrhoea, nausea and vomiting, mucositis, skin pigmentation, taste change, hair colour changes, palmar plantar erythema, blistering, hypertension, neutropenia +/- sepsis, thrombocytopaenia, epistaxis, cardiovascular disease

THIS PROTOCOL HAS BEEN DIRECTED BY DR FYFE, CONSULTANT MEDICAL ONCOLOGIST

RESPONSIBILITY FOR THIS PROTOCOL LIES WITH THE HEAD OF SERVICE

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