BC Cancer Protocol Summary for Symptomatic Management of Functional Carcinoid and Neuroendocrine Tumors of the GI Tract using Octreotide Long Acting

Protocol Code GIOCTLAR

Tumour Group Gl

Contact Physician

GI Systemic Therapy

ELIGIBILITY:

 Functional neuroendocrine tumours of the mid-gut or pancreas (including carcinoid tumours and VIPoma), with symptoms due to ectopic hormone secretion (flushes, diarrhea, wheezing, etc.)

EXCLUSIONS:

Pregnant or lactating women

TESTS:

- No specific tests apart from those required to monitor the underlying disease
- A pretreatment ultrasound of the gall bladder is recommended to rule out the formation of gallstones. Repeat every 6 months while on therapy.

PREMEDICATIONS:

Not usually required

TREATMENT:

Drug	Dose	BC Cancer Administration Guideline
octreotide long acting	20 to 30 mg	Intramuscular (deep intragluteal*) injection

^{*}May use quadriceps for self-administration

Repeat every four weeks as long as patient has symptomatic benefits. Treatment may be started while patient is receiving octreotide daily SC injections. These should be continued for two weeks after the first octreotide monthly IM injection. However, initiation of monthly octreotide long acting does not necessarily require a subcutaneous octreotide trial and monitoring period.

DOSE MODIFICATIONS:

For patients in whom symptoms are not fully controlled within the 4 weeks, the dose of octreotide long acting may be increased incrementally to a maximum of 60 mg every 4 weeks. For patients with breakthrough symptoms, every 3 week dosing may be considered. However, total monthly dosing greater than 60 mg requires CAP approval.

PRECAUTIONS:

- Concomitant diabetes: Patients on oral hypoglycemics or insulin should be monitored closely for changes in blood glucose levels for several days after the start of octreotide long acting to determine the need for any dosage adjustments.
- Previous history of gallstones.
- Potential for some impairment in thyroid function: monitor for signs and symptoms of hypothyroidism.

Call the GI Systemic Therapy physician at your regional cancer centre or the GI Systemic Therapy Chair Dr. Theresa Chan at (604) 930-2098 with any problems or questions regarding this treatment program.

References:

Singh S, et al. Diagnosis and management of gastrointestinal neuroendocrine tumors: An evidence-based Canadian consensus. Cancer Treat Rev 2016;47:32-45.