

LOMUSTINE

INDICATION (ICD10) C71, C72

1. High and low grade gliomas (relapse following first line treatment). PS 0, 1, 2

REGIMEN

Day 1 LOMUSTINE (CCNU) 100mg/m² (maximum 200mg) orally single dose only

CYCLE FREQUENCY AND NUMBER OF CYCLES

Every 42 days for up to 6 cycles

ADMINISTRATION

Available as 40mg capsules

Take at night on an empty stomach

ANTI-EMETICS

Moderate risk day 1 (take before lomustine dose)

Patients may already be taking dexamethasone for raised intracranial pressure

CONCURRENT MEDICATION REQUIRED

Lomustine	Lorazepam 1mg single dose may be helpful
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EXTRAVASATION AND TYPE OF LINE / FILTERS

Not applicable

INVESTIGATIONS

Blood results required before SACT administration

FBC, U&E and LFTs every cycle

Neutrophils x 10⁹/L ≥1.5

Platelets x 10⁹/L ≥100

Serum creatinine every cycle

Baseline weight and every cycle

MAIN TOXICITIES AND ADVERSE REACTIONS

Lomustine	Myelosuppression
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DOSE MODIFICATIONS

Haematological

Lomustine

If neutrophils <1.5x10⁹/L and platelets <100x10⁹/L, delay 1 week or until count recovered then restart at 75% dose, then at 50% dose with further myelosuppression, dose can be reduced further to 25% dose.

Renal impairment

Lomustine

CrCl >60ml/min	give 100%
CrCl 45-60ml/min	give 75%
CrCl 30-45ml/min	give 50%
CrCl <30ml/min	Not recommended

REFERENCES

1. Thomas D et al. J Clin Oncol; 19: 509-518
2. Cairncross et al. 2013 RTOG 9402 trial
3. Taal et al. 2014 BELOB study