Bicalutamide (Casodex®)

1. CIRCUMSTANCES WHEN SHARED CARE IS APPROPRIATE

- Prescribing responsibility will only be transferred when the patient’s condition is stable or predictable.
- The Consultant will communicate to the GP the reason for choice of bicalutamide over an LHRH analogue, the specific indication for use and intended duration of treatment.
- The patient will be given the first month’s supply of therapy from the hospital.

1. AREAS OF RESPONSIBILITY

<table>
<thead>
<tr>
<th>GP responsibilities (include monitoring arrangements)</th>
<th>Consultants responsibilities (include monitoring arrangements)</th>
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</thead>
<tbody>
<tr>
<td>▪ To prescribe bicalutamide once patient is stabilised</td>
<td>▪ To initiate and stabilise patient on bicalutamide</td>
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<tr>
<td>▪ To refer back to the consultant if there are any signs of disease progression such as bone pain or increasing urinary symptoms</td>
<td>▪ Outpatient appointments at least every 6 months (based on clinical need)</td>
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<td></td>
<td>▪ Patient counselling - expected side effects and their management</td>
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<td></td>
<td>▪ Blood tests: LFTs every 6 months, PSA when appropriate</td>
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</tbody>
</table>

2. COMMUNICATION AND SUPPORT

**RBCH Urology Dept:**
Consultants
Mr A Wedderburn
Mr C Carter
Mr J Rundle
Mr K Turner

Daytime contact 01202 704945 or via Hospital Switch Board 01202 303626
Ext: Ask for relevant Consultant
Fax no: 01202 704618
Email: andrew.wedderburn@rbch.nhs.uk or charles.carter@rbch.nhs.uk etc.

Out of hours contact: Hospital Switch Board: 01202 303626
Ask for the appropriate on call Registrar

**PHT Clinical Oncology:**
Consultants
Dr P Crellin
Dr S Brock
Dr J Davies

Daytime contact 01202 448435 or via Hospital Switch Board: 01202 665511
Ext 8435 or 2492
Fax no: 448259
Email: natalie.york@poole.nhs.uk

Out of hours contact:
Hospital Switch Board: 01202 665511
Ask for the appropriate on call Registrar

**WDGH Urology Dept:**
Consultants
Mr Stephen Andrews
Mr Andrew Cornaby

Daytime contact 01305 255274 or via Hospital Switch Board: 01305 251150
Ext 5274 or 5470
Fax no: 01305 255326
Email: stephen.andrews@wdgh.nhs.uk or andrew.cornaby@wdgh.nhs.uk

Out of hours contact:
Hospital Switch Board: 01305 251150
Ask for the appropriate on call Registrar

Specialist support/resources available to GP including patient information
Summary of Product Characteristics Casodex® 50mg and Casodex® 150mg
Medicines Information, RBCH Tel 01202 704098 / Poole Tel 01202 442127
AstraZeneca Medical Information Tel 0800 783 0033

Shared care guidelines were prepared by
S. Costello, Lead Pharmacist DCN (adapted from Royal Marsden Document) Jan 2007.
Agreed by: Dorset Cancer Network Urology Site Specific Group 5th Jan 07.
Approved by Bournemouth, Dorset and Poole Prescribing Forum June 2007.
# 3. CLINICAL INFORMATION

<table>
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<tr>
<th>Prescribed indications, dose and duration of treatment</th>
<th>1/ Advanced prostate cancer</th>
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<td>*Criteria for monotherapy:</td>
<td>• <strong>Bicalutamide tablets 50mg</strong> daily - as continuous treatment in combination with an LHRH analogue (until disease progression)</td>
</tr>
<tr>
<td>1) Previous osteoporotic fracture.</td>
<td>2/ Non metastatic prostate cancer</td>
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<tr>
<td>2) Loss of sexual function would significantly reduce quality of life.</td>
<td>• <strong>Bicalutamide tablets 150mg</strong> daily monotherapy in patients meeting criteria*, for</td>
</tr>
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<td>3) Treatment with LHRH analogue has lead to unacceptable reduction in quality of life.</td>
<td>a) sole treatment for locally advanced or progressive prostate cancer when treatment will be continuous (until disease progression)</td>
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<td>1/ Advanced prostate cancer</td>
<td>b) neoadjuvant treatment for 3 months pre radiotherapy and continuing until 1 month post radiotherapy (max 6 months)</td>
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<td><strong>Bicalutamide tablets 150mg</strong> daily monotherapy</td>
<td>c) adjuvant therapy along with radiotherapy for total of 2.5 years max.</td>
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### Therapeutic summary

*Brief description of drug’s effects*

Bicalutamide is a non-steroidal anti-androgen, devoid of other endocrine activity. It binds to androgen receptors and thus inhibits the androgen stimulus. Regression of prostatic tumours results from this inhibition.

### Route of administration

**Oral**

### Adverse effects

In general, well tolerated

Bicalutamide 50mg - hot flushes, decreased libido, pruritis, breast tenderness, gynaecomastia, diarrhoea, nausea, vomiting and dry skin.

Bicalutamide 150mg monotherapy - as above although gynaecomastia and breast tenderness very common (30-50%). Transient hepatic changes have been observed. Cardiovascular side effects have been rarely observed.

### Monitoring Requirements

See Section 1

### Clinically relevant drug interactions

Effect of warfarin may be enhanced

Caution with: ciclosporin, calcium channel blockers, cimetidine and ketoconazole.

### Cost (BNF)

- Bicalutamide 50mg, 28 tab pack = £128
- Bicalutamide 150mg, 28 tab pack = £240

### Other information

Bicalutamide monotherapy 150mg od demonstrates similar efficacy to LHRH analogues for locally advanced non-metastatic prostate cancer but may maintain libido and is associated with improved quality of life in clinical trials. Compared to LHRH analogues, bicalutamide use is associated with less erectile dysfunction with a proportion of men retaining satisfactory sexual activity. Bicalutamide monotherapy is associated with an increased rather than a suppressed testosterone level which is advantageous for maintenance of bone density, muscle bulk, erythropoiesis and may carry a lower long term risk of cardiovascular disease.

Men being maintained on bicalutamide monotherapy (> 6 months) will be offered breast bud irradiation at Poole Hospital to minimise risk of painful gynaecomastia.

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