

Oral Anticancer Medicine Rota

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Page:	1 OF 1	Valid until:	Next Review	Pharmacist:	E Purslow

Patient label:

Hb
WCC
Nts
Plt

Na⁺
K⁺
U
Cr
GFR
Ca
Mg

Alb
Bili
AlkPhos
ALT

Height
Weight
BSA

Date

Reference: SmPC for Darolutamide

**Darolutamide for
non-metastatic castration
resistant prostate cancer
(nmCRPC)**

Please supply

Pharmacy use - quantity

Further Information

DOSE.....B.D

DURATION TO SUPPLY

- Starting dose usually 600mg BD
- Dose reduced to 300mg BD in the event of toxicity.
- Taken continuously with food
- Available as 300mg tablets

- Patient should be referred to pharmacist for counselling prior to starting first cycle.
- Darolutamide is a high cost drug and funding must be sorted before starting treatment.
- Darolutamide is metabolised by CYP3A4 and therefore the concomitant use of strong CYP3A4/ P-gp inducers (phenytoin, rifampicin, St John's Wort, carbamazepine, phenobarbital) should be avoided. Caution with CYP3A4 inhibitors (ritonavir, ketoconazole, itraconazole, erythromycin, clarithromycin, grapefruit juice).
- Darolutamide is a BCRP, OATP1B1/1B3 inhibitor. Avoid use of rosuvastatin with Darolutamide. Other substrates such as methotrexate, sulfasalazine, fluvastatin, atorvastatin, pitavastatin should be monitored closely for increased toxicity.
- Darolutamide is a mild CYP3A4 inducer. Increased monitoring is needed for CYP3A4 substrates with narrow therapeutic window e.g. warfarin.
- Darolutamide tablets may prolong the QT interval and should therefore be avoided in patients taking other drugs known to have the same effect.

Additional medication – drug and dose

Pharmacy use - quantity

BLOOD TESTS

Hepatic function: No recommended reduction in mild impairment. In **moderate or severe** impairment - starting dose is 300 mg twice daily.
Renal function: < 30ml/min - starting dose 300 mg twice daily.
Haematology: Neuts < 1.0 x 10⁹/L or plts < 100 x 10⁹/L contact prescriber. Reduced neutrophils common with longer treatment.

Frequency

Baseline results needed. Then monitor monthly. Frequency may be reduced to 3 monthly in stable patients.

Prescriber's Name

Signature

Date

Pharmacist's Name

Signature

Date