

Other indications for Everolimus

→ Renal cell cancer, advanced:

Oral: 10 mg once daily, continue treatment until disease progression or unacceptable toxicity.

→ Renal cell carcinoma, advanced (off-label dose/combination):

Oral: 5 mg once daily (in combination with lenvatinib), continue until disease progression or unacceptable toxicity. [1] [2] [3]

→ Tuberous sclerosis complex-associated partial-onset seizures (dosing based on body surface area):

Oral: Initial: 5 mg/m2 once daily; continue until disease progression or unacceptable toxicity.

- → Tuberous sclerosis complex-associated renal angiomyolipoma:

 Oral: 10 mg once daily, continue treatment until disease progression or
 - unacceptable toxicity.
- → Tuberous sclerosis complex-associated subependymal giant cell astrocytoma (SEGA; dosing based on BSA):

Oral: Initial: 4.5 mg/m² once daily; continue until disease progression or unacceptable toxicity.

- [1] Motzer RJ, Escudier B, Oudard S, et al, "Efficacy of Everolimus in Advanced Renal Cell Carcinoma: A Double-Blind, Randomised, Placebo-Controlled Phase III Trial," Lancet, 2008, 372(9637):449-56.[PubMed 18653228]
- [2]- Motzer RJ, Escudier B, Oudard S, et al, "Phase 3 Trial of Everolimus for Metastatic Renal Cell Carcinoma: Final Results and Analysis of Prognostic Factors," Cancer, 2010, 116(18):4256-65.[Pub 20549832]
- [3]- Motzer RJ, Hutson TE, Glen H, et al. Lenvatinib, everolimus, and the combination in patients with metastatic renal cell carcinoma: a randomised, phase 2, open-label, multicentre trial. Lancet Oncol. 2015;16(15):1473-1482.[PubMed 26482279]