BCCA Protocol Summary for Suppressive Therapy for Pituitary Adenomas using Cabergoline

Protocol Code

CNCAB

Neuro-Oncology

Dr. Brian Thiessen

Tumour Group

Contact Physician

ELIGIBILITY:

Pituitary adenomas producing prolactin (prolactinoma) or growth hormone

EXCLUSIONS:

- Pregnancy
- Uncontrolled hypertension

TESTS:

- Baseline: Prolactin level, CT or MRI pituitary, pregnancy test if applicable, visual field and vision assessment if macroadenoma.
- At 4 weeks, repeat prolactin level, then repeated as clinically indicated
- At 6 months, prolactin level and CT pituitary; thereafter, prolactin level annually
- If clinically indicated: CT pituitary
- For macroadenoma, confirm improvement in any visual field and vision abnormalities before continuing cabergoline on a long term basis

PREMEDICATIONS:

None

TREATMENT:

Drug	Dose	BCCA Administration Guideline
cabergoline	0.5 mg twice a week	PO with food

DOSE MODIFICATIONS:

- 1. Dose Titration:
- Titrate dose upward according to prolactin level
- If prolactin normalises, reduce to the lowest dose that maintains it in normal range

2. Visual Field Abnormalities:

- if present at baseline, start cabergoline at 1mg twice a week
- reduce dose only <u>after</u> visual field abnormalities have normalised and tumour shrinkage confirmed with imaging

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PRECAUTIONS

- 1. Hypotension: may occur during the first few days of treatment
- 2. Pregnancy: seek medical advice if pregnancy occurs during treatment.

Call Dr. Brian Thiessen or tumour group delegate at (604) 877-6000 or 1-800-663-3333 with any problems or questions regarding this treatment program.

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