

# SHARED CARE GUIDELINE

## GONADORELIN ANALOGUES

### INTRODUCTION

Metastatic cancer of the Prostate usually responds to hormonal treatments aimed at androgen depletion. Gonadorelin analogues such as Goserelin and Leuprorelin may be given. During the initial stages of treatment with a gonadorelin analogue, it can cause tumour 'flare' which may lead to spinal cord compression, ureteric obstruction or increased bone pain. It is therefore important that the first injection is covered by an appropriate anti-androgen.

### INDICATIONS

<b>GOSERELIN ( Zoladex )</b>	<b>LEUPRORELIN ACETATE ( Prostap )</b>
Goserelin is indicated in the management of Prostate cancer suitable for hormonal manipulation.	Leuprorelin Acetate is indicated for the treatment of advanced prostatic cancer.
Available as: <b>Goserelin 3.6mg depot injection</b>  <b>Goserelin LA 10.8mg depot injection</b>	Available as: <b>Leuprorelin Acetate (Prostap SR) 3.7mg depot injection</b> <b>Leuprorelin Acetate (Prostap 3) 11.25mg depot injection</b>

### DOSE AND ADMINISTRATION

<b>GOSERELIN ( Zoladex )</b>	<b>LEUPRORELIN ACETATE ( Prostap )</b>
<b>Goserelin 3.6mg depot injected subcutaneously into the anterior wall, every 28 days or goserelin LA 10.8mg depot injected subcutaneously every 12 weeks.</b>  No dosage adjustment is necessary for patients with renal or hepatic impairment or in the elderly	<b>Leuprorelin 3.75mg injection by subcutaneous or intramuscular injection every 4 weeks or Leuprorelin 11.25mg subcutaneously every 12 weeks.</b>

### CONTRA-INDICATIONS

- Gonadorelin analogues should not be given to patients with a known hypersensitivity to either goserelin or leuprorelin or to other luteinizing hormone releasing hormone ( LHRH ) analogues.
- Pregnancy and lactation.

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## SPECIAL WARNINGS AND PRECAUTIONS FOR USE

The potential risk of developing ureteric obstruction or spinal cord compression should be considered and the patients should be monitored during the first month. In order to reduce the risk of the flare, an anti androgen should be **initiated 7 days before the LHRH agonist and continued for 7 days thereafter.**

**If an anti-androgen is used over a prolonged period, due attention should be given to the contraindications and precautions associated with its use.**

## INTERACTIONS

No known interactions

## SIDE-EFFECTS

- Skin rashes – these are generally mild and often regress without discontinuation of therapy.
- Local reactions – occasionally mild bruising at the subcutaneous site may occur.
- Usually transient changes in blood pressure (hypotension and hypertension)
- Hot flushes and a decrease in libido
- Breast tenderness and swelling
- Bone pain and may also cause a loss of bone mineral density.
- Hypersensitivity reactions, headaches, visual disturbances, dizziness, arthralgia and possibly myalgia.

See BNF and summary of product characteristics for a comprehensive list.

## MONITORING

### GOSERELIN

- If the patient is on once a month preparation, then the patient's response to the gonadorelin analogue should be reviewed at three monthly intervals and then changed to three monthly injections if appropriate.

### LEUPRORELIN ACETATE

- Blood glucose should be monitored more frequently in patients with diabetes as leuprorelin may increase blood glucose

**REMEMBER if unsure at any point: Contact the various Specialists and or Specialist Nurse/ Nurse Practitioner via the Homerton Hospital switchboard on 020 8510 5555.**