

BCCA Protocol Summary for High-Dose Ketoconazole Therapy for the Short Term Hormonal Management for Metastatic Prostate Cancer

Protocol Code: GUPKETO

Tumour Group: Genitourinary

Contact Physician: Dr. Kim Chi (VCC)

Eligibility/Tests:

Medical orchiectomy (castration) of patients with prostate cancer required urgently or emergently. eg. DIC, spinal cord compression.

Treatment:

Ketoconazole 400 mg PO q 8 hours with hydrocortisone 20 mg PO bid or prednisone 5 mg PO bid. Ketoconazole is not reimbursed on benefit drug list.

Dose Modifications:

None. q8 hr dosing required as half life short.

Benefits:

Castrate levels of testosterone in 24-48 hours.

Precautions:

Treatment not recommended long term because of side effects. May inhibit corticosteroid synthesis and there is a known blunted corticotropin stimulation test.

Alternative:

Surgical or medical orchidectomy (castration) should begin soon after instituting ketoconazole.

Side Effects:

Nausea (mild) 50%, vomiting, increased LFT's and lethargy.

Call Dr. Kim Chi 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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Date(s) Revised: 1 Dec 2009 (reformatted)

References

1. Ketoconazole and liarozole in the treatment of advanced prostate cancer. Maller, C Cancer Suppl. V71:3:Feb1, 1993.
2. Pont A. Long-term experience with high-dose ketoconazole therapy in patients with stage D2 prostatic carcinoma. J Urol 137(5):902-4, 1987.