BCCA Protocol Summary for Palliative Therapy for Malignant Melanoma Using Tamoxifen

Protocol Code
SMTAM

Tumour Group
Melanoma

Contact Physician
Dr. Vanessa Bernstein

ELIGIBILITY:
- Metastatic malignant melanoma when other treatment modalities are not advisable

EXCLUSIONS:
- Patients with a history of significant thromboembolic disease

TESTS:
- Clinical assessment every 3-6 months to monitor disease progress (unless obvious clinical progression, then use clinical discretion regarding further imaging)
- If clinically indicated: Liver enzymes, bilirubin

TREATMENT:
- Tamoxifen 20 mg po BID until evidence of progression

PRECAUTIONS:
1. **Myelosuppression:** In melanoma patients, any observed hematologic abnormality would be idiosyncratic and routine CBCs are not recommended.
2. **Endometrial Cancer:** Annual gynecologic examinations are recommended. Pelvic complaints, such as unusual vaginal bleeding, require prompt evaluation.
3. **Ocular Toxicity:** Ocular toxicity is rare and may occur after only a few weeks of therapy, although it is more common with prolonged treatment. Ophthalmologic examination is recommended if visual disturbances occur.
4. **Thromboembolism:** Tamoxifen is associated with an increased risk of thromboembolism that is comparable to estrogen replacement therapy.
5. **Hepatotoxicity:** While hepatotoxicity is rare and usually presents as elevated hepatic enzymes, more serious liver abnormalities have been reported.
6. **Ovulation Induction:** Tamoxifen may induce ovulation in pre- and peri-menopausal women. Barrier forms of contraception are recommended.

Call Dr. Vanessa Bernstein or tumour group delegate at (250) 519-5500 or 1-800-663-3333 with any problems or questions regarding this treatment program.

Date activated: 21 June 1996
Date revised: 01 Jun 2017 (Contact physician updated)
References: