BC Cancer Protocol Summary for Suppressive Therapy for Pituitary Adenomas using Bromocriptine

CNB

Protocol Code

Neuro-Oncology

Tumour Group

Dr. Rebecca Harrison

Contact Physician

ELIGIBILITY:

Patients must have:

Pituitary adenomas producing prolactin (prolactinoma) or growth hormone

EXCLUSIONS:

Pregnant or breast feeding women

CAUTION:

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 bromocriptine on a long term basis

PREMEDICATIONS:

None

TREATMENT:

Drug	Dose	BC Cancer Administration Guideline
bromocriptine	2.5 mg bid	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:

 reduce dose only <u>after</u> visual field abnormalities have normalised and tumour shrinkage confirmed with imaging

If side effects are intolerable, may use oral tablets vaginally in female patients. A dose reduction may be required since no first pass effect with vaginal use.

PRECAUTIONS

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

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