

8. Malignant Disease and Immunosuppression

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[For cost information please go to the most recent cost comparison charts](#)

Key

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	Amber drug see GMMMG RAG list <i>Click on the symbols to access this list</i>
	Green drug see GMMMG RAG list <i>Click on the symbols to access this list</i>
U	If a medicine is unlicensed this should be highlighted in the template as follows Drug name U
	Not Recommended
OTC	Over the Counter
Order of Drug Choice	Where there is no preferred 1 st line agent provided, the drug choice appears in alphabetical order.

Chapter	8 Malignant Disease and Immunosuppression
Section	8.1 Cytotoxic Drugs
	<p>The chemotherapy of cancer is complex and should be confined to specialists in oncology and haematology. NPSA anti-cancer drug recommendations</p> <p>NOTE: a number of cytotoxic medicines that are used for indications other than cancer are listed elsewhere in this formulary under the relevant chapter e.g. methotrexate for rheumatological indications in chapter 10.</p> <p>Only trained pharmacy personnel should reconstitute cytotoxics and prescription validation should only be carried out by suitably trained pharmacists. Pharmacy Guidelines for the safe use of oral anti-cancer medicines are available on the GMMMG website. The GMCCN policy and procedure for chemotherapy administration provides further information.</p> <p>All cytotoxics with a positive NICE Health Technology Appraisal are approved for use in Greater Manchester, with a RED RAG status.</p> <p>NHS England's Cancer Drug Fund provides a further list of approved uses of cytotoxic drugs and the latest national funding policies.</p>
Additional Notes	Link to additional notes document
Subsections	8.1.1 Alkylating drugs, 8.1.2 Anthracyclines and other cytotoxic antibiotics, 8.1.3 Antimetabolites, 8.1.4 Vinca alkaloids and etoposide, 8.1.5 Other antineoplastic drugs
Additional Notes	<p>All cytotoxics with a positive NICE Health Technology Appraisal are approved for use in Greater Manchester, with a RED RAG status.</p> <p>NHS England's Cancer Drug Fund provides a further list of approved uses of cytotoxic drugs and the latest national funding policies.</p> <p>Links to NICE guidance:</p> <p>Index of NICE guidance on cancer</p> <p>Links to MHRA advice:</p> <p>MHRA DSU (April 2017): Ponatinib (Iclusig▼): risk of vascular occlusive events—updated advice on possible dose reduction</p> <p>MHRA DSU (May 2016): BCR-ABL tyrosine kinase inhibitors: risk of hepatitis B reactivation</p> <p>MHRA DSU (May 2016): Idelalisib (Zydelig): interim measures following signal of serious infection and deaths related to infection found in clinical trials</p> <p>MHRA DSU (Sept 2016): Idelalisib (Zydelig▼): updated indications and advice on minimising the risk of infection</p>

Section	8.2 Drugs affecting the immune response	
Subsection	8.2.1 Antiproliferative immunosuppressant	
First choice	Azathioprine Tablets 25mg, 50mg	 GM SCG: Azathioprine for Interstitial Lung Disease
Alternatives	Mycophenolate Mofetil Capsules 250mg, Tablets 500mg	 MHRA DSU: Mycophenolate mofetil, mycophenolic acid: new pregnancy-prevention advice for women and men 2015 NICE TA481: Immunosuppressive therapy for kidney transplant in adults NICE TA482: Immunosuppressive therapy for kidney transplant in children and young people
	Mycophenolic acid (Myfortic®) Gastro-resistant tablets 180mg, 360mg	
Additional notes		
<p>All new patients commenced on mycophenolate mofetil should be commenced on a “branded generic” preparation. Mycophenolate mofetil and mycophenolic acid are not interchangeable. Patients on Myfortic® must remain on Myfortic®.</p>		
Subsection	8.2.2 Corticosteroids and immunosuppressant	
First choice	Ciclosporin Capsules 25mg, 50mg, 100mg Oral solution 100mg/ml	 Prescribe by brand. Do not switch between brands.
Alternatives	Tacrolimus Capsules 500microgram, 1mg, 2mg, 5mg Granules 200microgram, 1mg Modified-release capsules 500microgram, 1mg, 3mg, 5mg	 MHRA DSU: Oral tacrolimus products: prescribe and dispense by brand name only, to minimise the risk of inadvertent switching between products, which has been associated with reports of toxicity and graft rejection, November 2017
	Sirolimus Tablets 500microgram, 1mg, 2mg Oral solution 1mg/ml	
	Basiliximab Powder and solvent for solution for injection 10mg, 20mg	 Specialist use only NICE TA481: Immunosuppressive therapy for kidney transplant in adults NICE TA482: Immunosuppressive therapy for kidney transplant in children and young people

Additional notes

Sirolimus tablets (Rapamune®) – the 500microgram tablets are not bioequivalent with the 1mg and 2mg tablets and multiples must not be used as a substitute for the other tablet strengths.

There are 3 different oral formulations of tacrolimus:

- *Adoport®*, *Prograf®*, *Capexion®*, *Tacni®*, and *Vivadex®* are immediate-release capsules that are taken twice daily, once in the morning and once in the evening;
- *Modigraf®* granules are used to prepare an immediate-release oral suspension which is taken twice daily, once in the morning and once in the evening;
- *Advagraf®* is a prolonged-release capsule that is taken once daily in the morning.

Switching between different oral formulations of tacrolimus requires careful supervision and therapeutic monitoring by an appropriate specialist.

Subsection	8.2.3 Antilymphocyte monoclonal antibodies	
	<p>Alemtuzumab ▼ Concentrate for IV infusion</p>	<p>R Specialist use only Causes lysis of B lymphocytes NICE TA312: Alemtuzumab for treating relapsing-remitting multiple sclerosis</p>
	<p>Natalizumab ▼ Concentrate for solution for infusion 300mg/15ml</p>	<p>R Specialist use only MHRA DSU: Natalizumab (Tysabri): progressive multifocal leukoencephalopathy – updated advice to support early detection (April 2016) NICE TA127: Natalizumab for the treatment of adults with highly active relapsing-remitting multiple sclerosis</p>
	<p>Ocrelizumab ▼ Concentrate for solution for infusion 300mg/10ml</p>	<p>R Specialist use only NICE TA533: Ocrelizumab for treating relapsing-remitting multiple sclerosis</p>
Subsection	8.2.4 Other immune-modulating drugs	
Interferon Alfa		
Alternatives	<p>Interferon alfa-2b (rbe) IntronA®</p> <ul style="list-style-type: none"> • Solution for injection (for subcutaneous injection or intravenous infusion) • Solution for injection pen (for SC injection) <p>Interferon alfa-2a (rbe) Roferon-A®</p> <ul style="list-style-type: none"> • Solution for injection pre-filled syringes (for subcutaneous use) • Solution for injection cartridges (for <i>Roferon®</i> pen device, subcutaneous and intramuscular use) • Solution for injection vials (for subcutaneous and intramuscular use) 	<p>R</p> <p>R</p>

PegInterferon Alfa	
<p>Peginterferon alfa-2a (rbe) Pegasys®</p> <ul style="list-style-type: none"> Solution for injection pre-filled syringe (for subcutaneous injection) <p>Peginterferon alfa-2b (rbe) ViraferonPeg®</p> <ul style="list-style-type: none"> Powder and solvent for solution for injection pre-filled pen (for subcutaneous injection) 	<p>R</p> <p>R</p> <p>NICE TA75: peginterferon alfa, interferon alfa, and ribavirin for chronic hepatitis C</p> <p>NICE TA300: peginterferon alfa and ribavirin for treating chronic hepatitis C in children and young people</p>
<p>Additional notes Link to additional notes document</p>	
Interferon Beta	
<p>Interferon beta-1a Avonex®, Rebif®</p> <p>Solution for injection pre-filled syringe</p> <p>Solution for injection pre-filled pens</p> <p>Powder and solvent for solution for injection vials</p> <p>Solution for injection cartridges (for RebiSmart® device)</p>	<p>R</p> <p>NICE TA527: Beta interferons and glatiramer acetate for treating multiple sclerosis</p>
<p>Interferon beta-1b Betaferon®</p> <p>Powder and solvent for solution for injection</p>	<p>R</p> <p>NICE TA527: Beta interferons and glatiramer acetate for treating multiple sclerosis</p>
<p>Additional notes</p> <p>NICE produced guidance (NICE TA32) on the use of beta interferon and glatiramer acetate which did not recommend them, because although it states that they work, there remains uncertainty about which patients benefit from these medicines and to what extent. The Department of Health (DH) produced a risk sharing scheme recommending these treatments, and helping ensure that they be made cost effective for the NHS to commission. (DH Health Service Circular HSC 2002/004). These treatments are now covered by NHS England policy Disease Modifying Therapies for Patients with Multiple Sclerosis (Ref: NHSCB/D04/P/a).</p> <p>MHRA DSU: Interferon beta: risk of thrombotic microangiopathy and risk of nephrotic syndrome, Oct 2014</p>	
Canakinumab	
<p>Canakinumab ▼</p> <p>Powder for solution for injection vial 150mg</p>	<p>R Specialist use only</p>

Dimethyl fumarate

	<p>Dimethyl fumarate Capsules 120mg and 240mg</p>	<p>R Specialist use only</p> <p>NICE TA320: Dimethyl fumarate for treating relapsing-remitting MS</p> <p>MHRA DSU: Dimethyl fumarate (Tecfidera®): fatal PML in an MS patient with severe prolonged lymphopenia patient with severe, prolonged lymphopenia, March 2015</p> <p>MHRA DSU: Dimethyl fumarate (Tecfidera): updated advice on risk of progressive multifocal leukoencephalopathy (April 2016)</p>
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Cladribine

	<p>Cladribine Mavenclad® Tablets 10mg</p>	<p>R</p> <p>NICE TA493: Cladribine tablets for relapsing-remitting multiple sclerosis</p>
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Fingolimod

	<p>Fingolimod ▼ Capsules 500microgram</p>	<p>R</p> <p>MHRA DSU: MS therapies: signal of rebound effect after stopping or switching therapy</p> <p>MHRA DSU: Fingolimod (Gilenya ▼): risks of progressive multifocal leukoencephalopathy, basal-cell carcinoma, and opportunistic infections (April 2016)</p> <p>MHRA DSU: Fingolimod (Gilenya ▼): updated advice about risk of cancers and serious infections, Dec 2017</p> <p>MHRA DSU: Fingolimod: not recommended for patients at known risk for cardiovascular adverse events, May 2012</p> <p>MHRA DSU: bradycardia and heart block, Jan 2013</p> <p>MHRA DSU: Fingolimod (Gilenya ▼) new contraindications for patients with pre-existing cardiac disorders, Dec 2017</p> <p>NICE TA254: Fingolimod for the treatment of highly active relapsing-remitting multiple sclerosis</p>
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Additional notes [Link to additional notes document](#)

Glatiramer acetate


Glatiramer acetate Copaxone®
Solution for injection pre-filled syringe
20mg/ml



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[NICE TA527: Beta interferons and glatiramer acetate for treating multiple sclerosis](#)



Additional notes

NICE produced guidance [NICE TA32](#) for the use of beta interferon and glatiramer acetate which did not recommend them, because although it states that they work, there remains uncertainty about which patients benefit from these medicines and to what extent. The Department of Health (DH) produced a risk sharing scheme recommending these treatments, and helping ensure that they be made cost effective for the NHS to commission. ([DH Health Service Circular HSC 2002/004](#)). These treatments are now covered by NHS England policy [Disease Modifying Therapies for Patients with Multiple Sclerosis \(Ref: NHSCB/D04/P/a\)](#).


Section	8.3 Sex hormones and hormone antagonists in malignant disease	
Subsection	8.3.1 Oestrogens	
	Diethylstilbestrol Tablets 1mg, 5mg Ethinylestradiol Tablets 10microgram, 50microgram, 1mg	G _n following specialist initiation
Subsection	8.3.2 Progestogens	
	Medroxyprogesterone acetate Tablets 10mg, 100mg, 200mg Megestrol acetate Tablets 160mg	G _n following specialist initiation
Subsection	8.3.4 Hormone antagonists	
Subsection	8.3.4.1 Breast cancer	
	Anastrozole Tablets 1mg	G _n following specialist initiation
	Exemestane Tablets 25mg	G _n following specialist initiation
	Letrozole Tablets 2.5mg	G _n following specialist initiation
	Tamoxifen Tablets 10mg, 20mg	G _n following specialist initiation
Do Not Prescribe	Fulvestrant Solution for injection (Faslodex®)	<u>Criterion 2 (see RAG list)</u>
Additional notes		
Link to additional notes document NICE TA112 Breast cancer (early) - hormonal treatments		
Subsection	8.3.4.2 Gonadorelin analogues and gonadotrophin-releasing hormone antagonists	
Gonadorelin analogues		
	Goserelin Zoladex® Implant pre-filled syringe 3.6mg (four weeks) Implant pre-filled syringe 10.8mg (twelve weeks)	 (for licensed indications) GMMMG SCP: GOSERELIN in breast cancer

	<p>Leuprorelin Prostav® Suspension for injection pre-filled syringe 3.75mg (four weeks) Suspension for injection pre-filled syringe 11.25mg (three months)</p> <p>Triptorelin Decapeptyl®, Gonapeptyl® Suspension for injection pre-filled devices 3.75mg (every four weeks) Suspension for injection vials 3mg (every four weeks) Suspension for injection vials 11.25mg (every three months) Suspension for injection vials 22.5mg (every six months)</p>	<p> (for licensed indications)</p> <p> (for licensed indications)</p> <p>Locally advanced non-metastatic tamocancer as alternative to surgical castration, metastatic prostate cancer, as an adjuvant to radiotherapy in high risk localised or locally advanced prostate cancer by intramuscular injection</p>
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Anti-androgens





	<p>Bicalutamide Tablets 50mg, 150mg</p> <p>Cyproterone acetate Tablets 50mg, 100mg</p>	<p> following specialist initiation</p> <p> following specialist initiation</p>
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Gonadotrophin-releasing hormone antagonists

	<p>Degarelix Powder for solution for injection 80mg, 120mg</p>	<p></p> <p>TA404: Degarelix for treating advanced hormone-dependent prostate cancer</p> <p>GMMMG SCP: Degarelix in advanced hormone dependent prostate cancer</p>
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Additional notes [Link to additional notes document](#)

Subsection 8.3.4.3 Somatostatin analogues

<p>First choice</p>	<p>Octreotide Solution for injection (various forms) 50microgram/1ml 100microgram/1ml, 500microgram/1ml, 1mg/5ml Suspension for injection (depot) 10mg, 20mg, 30mg</p>	<p> (for licensed indications)</p> <p> other indications</p>
<p>Alternatives</p>	<p>Lanreotide Solution for injection pre-filled syringe 60mg, 90mg, 120mg</p>	<p> (for licensed indications)</p> <p> other indications</p>

Additional notes [Link to additional notes document](#)