

# Lanreotide

## Indication

Treatment of patients with symptoms associated with functional\* gastro-entero-pancreatic endocrine tumours e.g. carcinoid tumours with features of the carcinoid syndrome.

\*Or non-functional but positive on octreotide or gallium PET/CT scan

Treatment of patients with advanced neuroendocrine tumours of the midgut or of unknown primary origin where non-midgut sites of origin have been excluded.

## Regimen details

Somatuline Autogel (long acting lanreotide) 120mg

## Cycle frequency

Every 4 weeks (higher doses or more frequent administration may be considered if there is inadequate symptom control)

## Number of cycles

Indefinite

## Administration

Remove from refrigerator 30 minutes before injection

Give by deep subcutaneous injection (slowly, over around 20 seconds). Alternate between left and right sides.

Store in a refrigerator between 2°C to 8°C in the original package

Once removed from the refrigerator, product left in its sealed pouch may be returned to the refrigerator for continued storage and later use, provided it has been stored for no longer than 24 hours at below 40°C and the number of temperature excursions does not exceed three.

## Investigations – pre first cycle

For functional carcinoid tumours consider a test dose with subcutaneous octreotide (50-100 micrograms)

## Investigations –pre subsequent cycles

Review monthly for the first 2-3 months then review every 3-6 months

Consider 6-monthly ultrasound examination of the gallbladder to identify treatable gallstones.

## Standard limits for administration to go ahead

N/A

## Dose modifications

No dose adjustment is necessary in patients with renal impairment or the elderly.

Dose adjustment may be required in patients with liver cirrhosis.

### Adverse effects

– for full details consult product literature/ reference texts

Diarrhoea, abdominal pain, cholelithiasis, hypoglycaemia, hyperglycaemia, diabetes mellitus, decreased appetite, dizziness, headache, lethargy, sinus bradycardia, injection site reactions, nausea, vomiting, constipation, flatulence

### Significant drug interactions

– for full details consult product literature/ reference texts

Bradycardia has been reported so consider adjusting doses of drugs such as beta blockers and calcium channel blockers.

Hyperglycaemia may occur and antidiabetic treatment may need to be adjusted.

### References

SPC <https://www.medicines.org.uk/emc/product/8257/smpc> – accessed 15/07/2020

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**THIS PROTOCOL HAS BEEN DIRECTED BY DR LAU, CLINICIAN FOR NEURO-ENDOCRINE TUMOURS**

**RESPONSIBILITY FOR THIS PROTOCOL LIES WITH THE HEAD OF SERVICE**

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