

BC Cancer Protocol Summary for Advanced Therapy for Endometrial Cancer using an Aromatase Inhibitor

Protocol Code

GOENDAI

Tumour Group

Gynecologic Oncology

Contact Physician

Dr. Paul Hoskins

ELIGIBILITY:

- Hormonal treatment for advanced endometrial cancer in postmenopausal women

EXCLUSIONS:

- Premenopausal women
- Patients who have progressed on an alternate aromatase inhibitor (note: may be used by patients who did not tolerate an alternate aromatase inhibitor).

TESTS

Baseline: If clinically indicated: serum cholesterol, triglycerides
Biannual bone density test

TREATMENT:

anastrozole 1 mg PO daily, until evidence of progression.

Or

letrozole 2.5 mg PO daily, until evidence of progression.

Or

exemestane 25 mg PO daily, until evidence of progression.

PRECAUTIONS:

1. Hepatic dysfunction: Aromatase inhibitors are considered safe in mild-to-moderate hepatic dysfunction but have not been studied in severe hepatic dysfunction.
2. Bone density: The long-term effects of aromatase inhibitors on bone density in adjuvant therapy patients are unknown. Supplementation with calcium and vitamin D and regular weight bearing exercise is recommended. A bisphosphonate should be considered if clinically indicated. Caution in patients with an already established diagnosis of clinically significant osteoporosis.
3. Hyperlipidemia: An increase in cholesterol or triglyceride levels may occur when an aromatase inhibitor is initiated. Levels may need to be checked during the first few months of therapy, especially in those patients with prior significant lipid elevations.

Contact Dr. Paul Hoskins or tumour group delegate at (250) 712-3900 or 1-888-563-7773 with any problems or questions regarding this treatment program.

References

1. Garrett A, Quinn MA, Hormonal therapies and gynaecological cancers. *Best Pract Res Clin Obstet Gynaecol* 2008;22(2):407-21.
2. Bellone S, Shah HK, McKenney JK, et al., Recurrent endometrial carcinoma regression with the use of the aromatase inhibitor anastrozole, *Am J Obstet Gynecol* 2008;199(3):e7-e10.