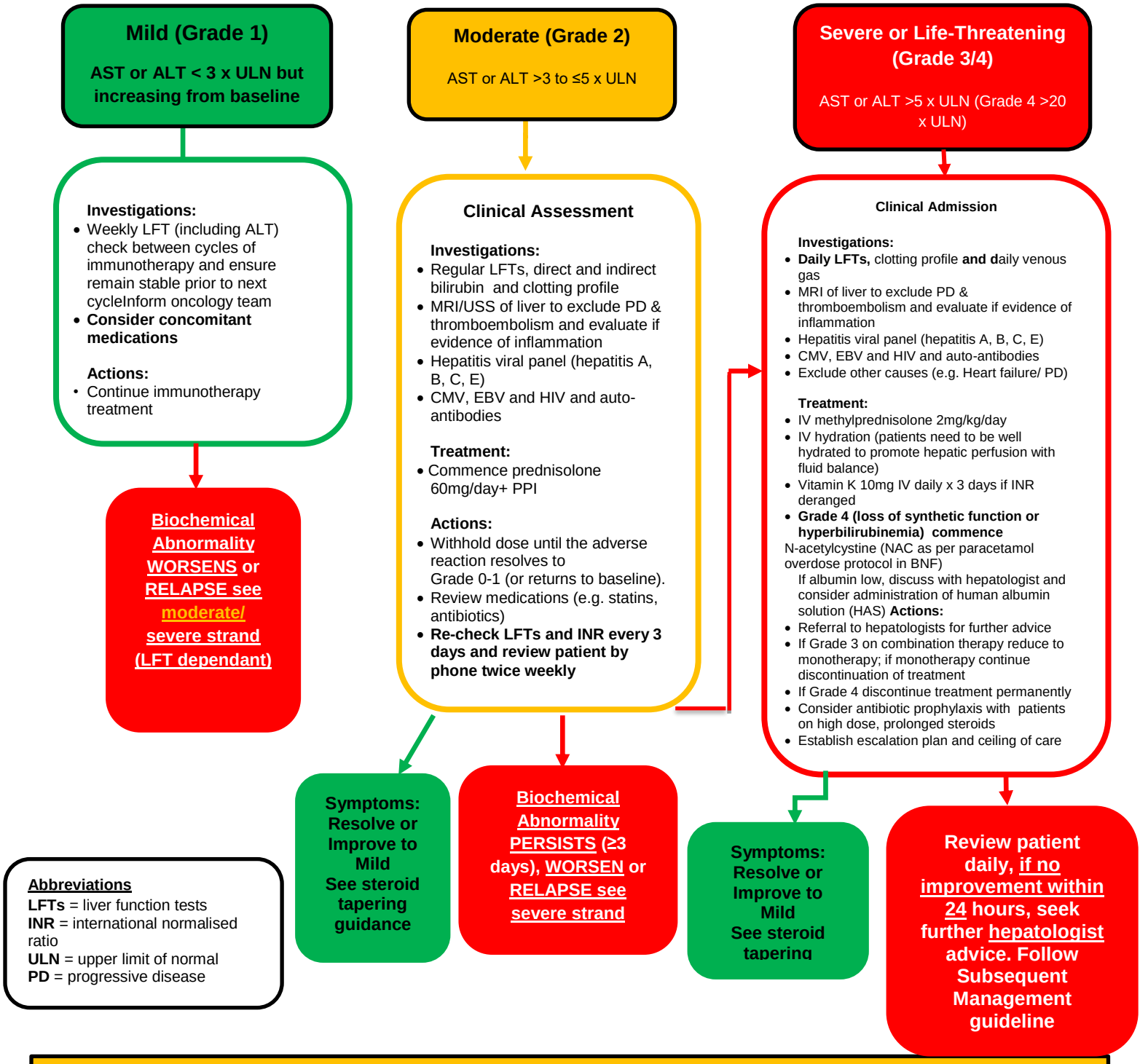
The Clatterbridge Cancer Centre NHS Foundation Trust

Immune-Related Adverse Event Guideline: Hepatoxicity

Hepatic transaminases (ALT/AST) and bilirubin must be evaluated before each dose of immunotherapy, as early laboratory changes may indicate emerging immune-related hepatitis. Elevations in LFTs may develop in the absence of clinical symptoms. This guidance should be used in context of baseline LFTs and presence of known liver metastases. No dose adjustment is required for mild hepatic impairment but data is limited for use of these drugs in moderate/severe hepatic impairment and patients should be closely monitored for elevation in LFTs from baseline.
Prior to commencement of immunotherapy all patients should have LFTs checked



Abbreviations
LFTs = liver function tests
INR = international normalised ratio
ULN = upper limit of normal
PD = progressive disease

Interrupt SACT immunotherapy until discussed with Acute Oncology Team. Please contact on-call oncology/haematology team for advice. Ensure that Acute Oncology/Haematology team are informed of admission.