

# Management of irinotecan and sacituzumab govitecan induced diarrhoea

**First report of diarrhoea:** Evaluate patient's condition (onset and duration of diarrhoea).

## Early onset diarrhoea (acute cholinergic syndrome)

- Occurs within a few hours of irinotecan or sacituzumab govitecan administration.
- Characterised by diarrhoea, rhinitis, hyper-salivation, miosis, lacrimation, diaphoresis, flushing and abdominal cramping.

### Treatment

- If no fever, dehydration or melaena.
- Atropine 0.3 to 0.6 mg IV/SC, repeated up to a maximum dose of 1.2 mg (unless contraindicated).
- Increase oral fluid intake/electrolytes.
- Start high dose loperamide – 4 mg initially, then 2 mg 2-hourly (maximum high dose loperamide treatment period is 48 hours, due to paralytic ileus).\*
- Dietary advice.

### If fever, dehydration or melaena:

- admit to hospital
- physical assessment by doctor
- stool specimen for blood/infection profile/clostridium difficile toxins
- bloods (FBC, EUC)
- increase oral fluids and replace electrolytes
- IV fluids and antibiotics, as appropriate.

## Late onset diarrhoea

Occurs 24 hours or more post irinotecan or sacituzumab govitecan administration.

### Treatment

- If no fever, dehydration or melaena.
- Stool specimen for blood/infection profile.
- Increase oral fluid intake/electrolytes.
- Start high-dose loperamide – 4 mg initially, then 2 mg 2-hourly (maximum high dose loperamide treatment period is 48 hours, due to paralytic ileus).\*
- Dietary advice.

\*Note: If prescribing loperamide, the sacituzumab govitecan product information recommends a maximum daily dose of 16 mg, however higher doses may be considered in severe diarrhoea.<sup>1</sup>

## Review after 12-24 hours

### Diarrhoea resolving

- Discontinue high dose loperamide after a 12 hour diarrhoea free interval.
- Dietary advice.

### Diarrhoea unresolved

If fever, dehydration or melaena:

- admit to hospital
- physical assessment by doctor
- stool specimen for blood/infection profile/C. Diff toxins
- bloods (FBC, EUC)
- increase oral fluids and replace electrolytes
- IV fluids and antibiotics, as appropriate.

### Diarrhoea unresolved

If no fever, dehydration or melaena:

- physical assessment by doctor
- stool specimen for blood/infection profile
- bloods (FBC, EUC)
- increase oral fluids and replace electrolytes.

## Review after 12-24 hours

### Diarrhoea resolving

- Discontinue high dose loperamide after a 12 hour diarrhoea free interval.
- Dietary advice.

### Diarrhoea unresolved

- Octreotide 100 to 150 mcg SC three times daily (if dehydration severe, escalate dose up to 500 mcg three times daily).
- Discontinue chemotherapy until all symptoms resolve; restart at reduced dose.

1. Spring, L. M., E. Nakajima, J. Hutchinson, et al. 2021. "Sacituzumab Govitecan for Metastatic Triple-Negative Breast Cancer: Clinical Overview and Management of Potential Toxicities." The Oncologist 26(10):827-834.