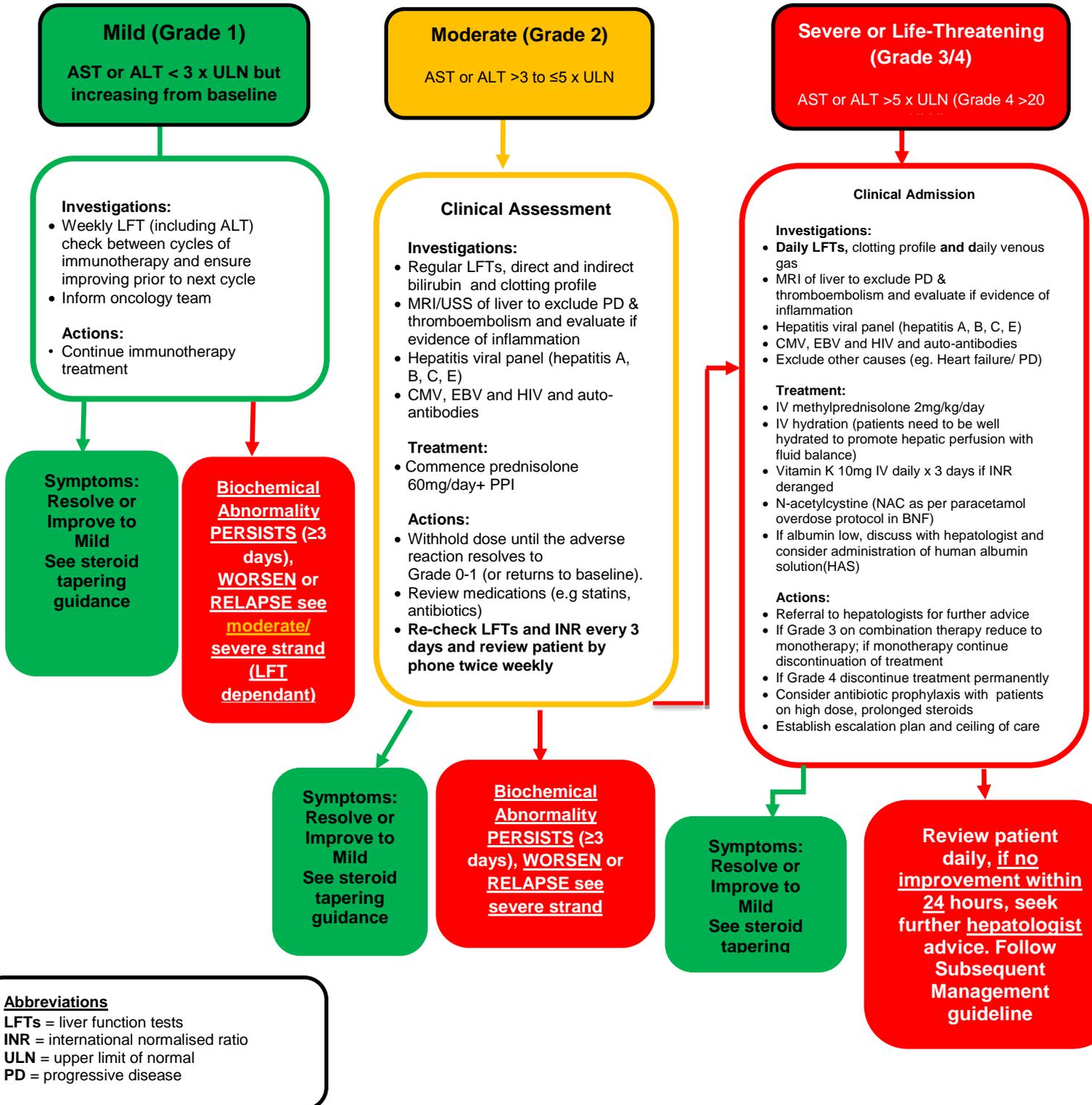


## Immune-Related Adverse Event: Hepatotoxicity

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.

Issue Date: 19 <sup>th</sup> March 2018	Page 1 of 1	Filename: GAMAHEPAT	Version No: 3.0
Author: Anna Olssen-Brown	Authorised by: Immuno-Oncology Working Group	Copy No:	