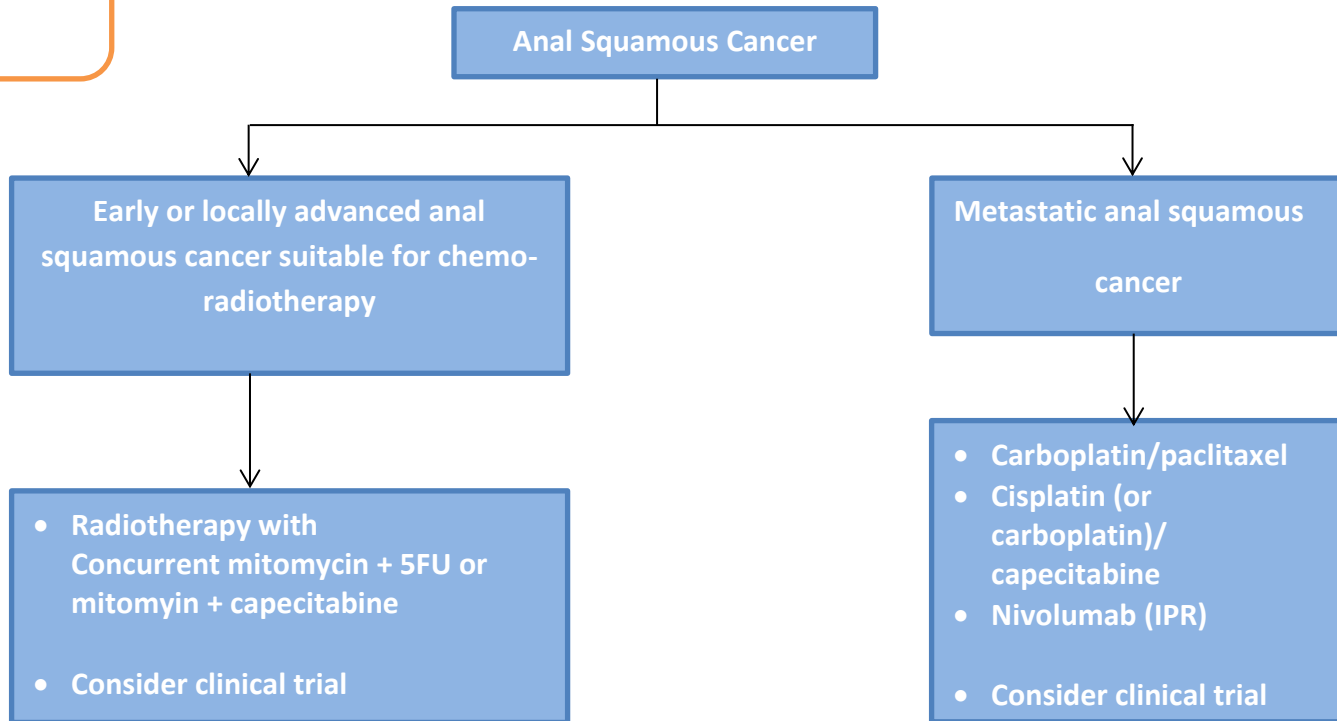


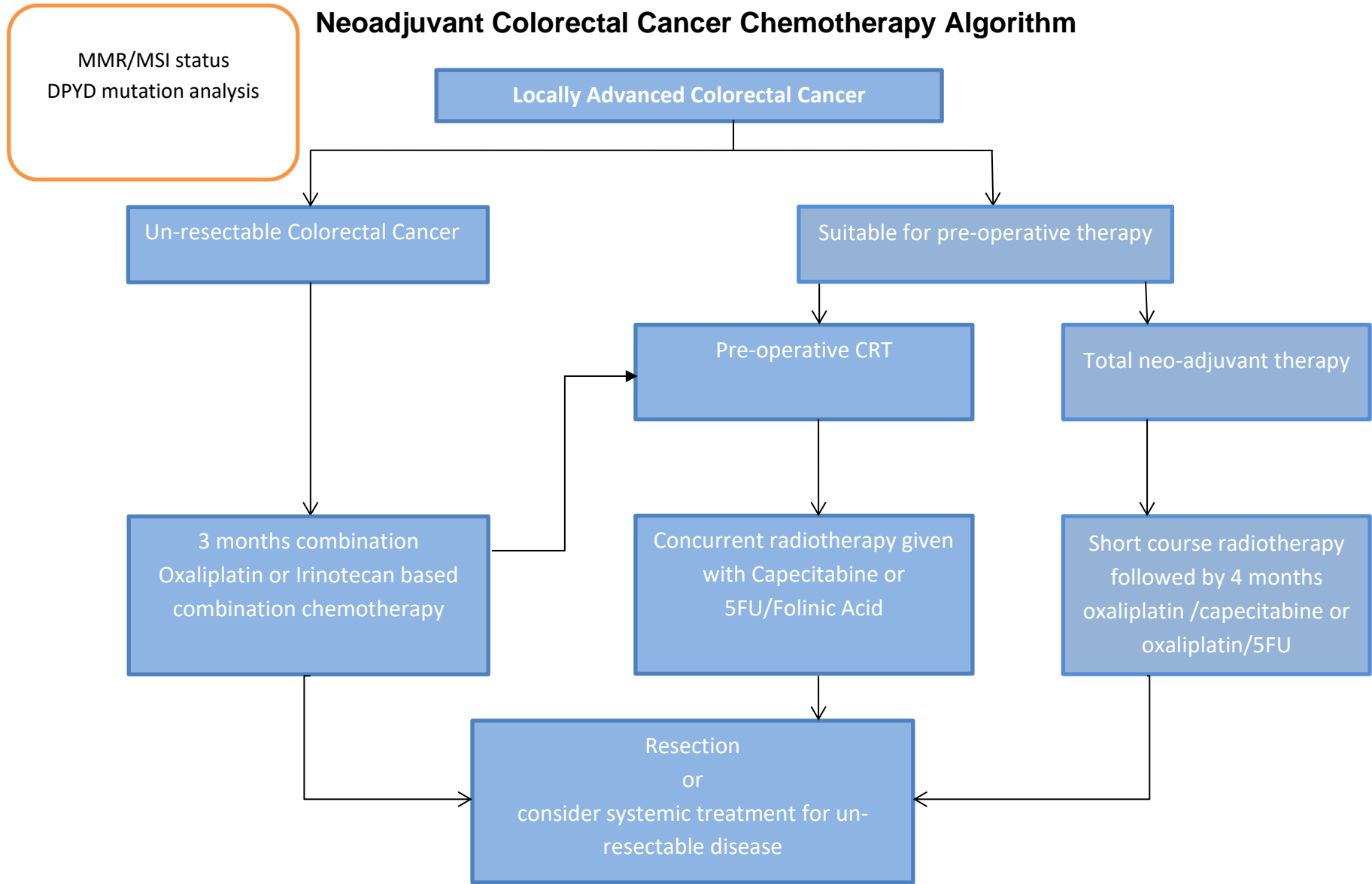
Anal Cancer Chemotherapy Algorithm

DPYD mutation analysis



Recruitment to clinical trials should be considered where appropriate

Neoadjuvant Colorectal Cancer Chemotherapy Algorithm

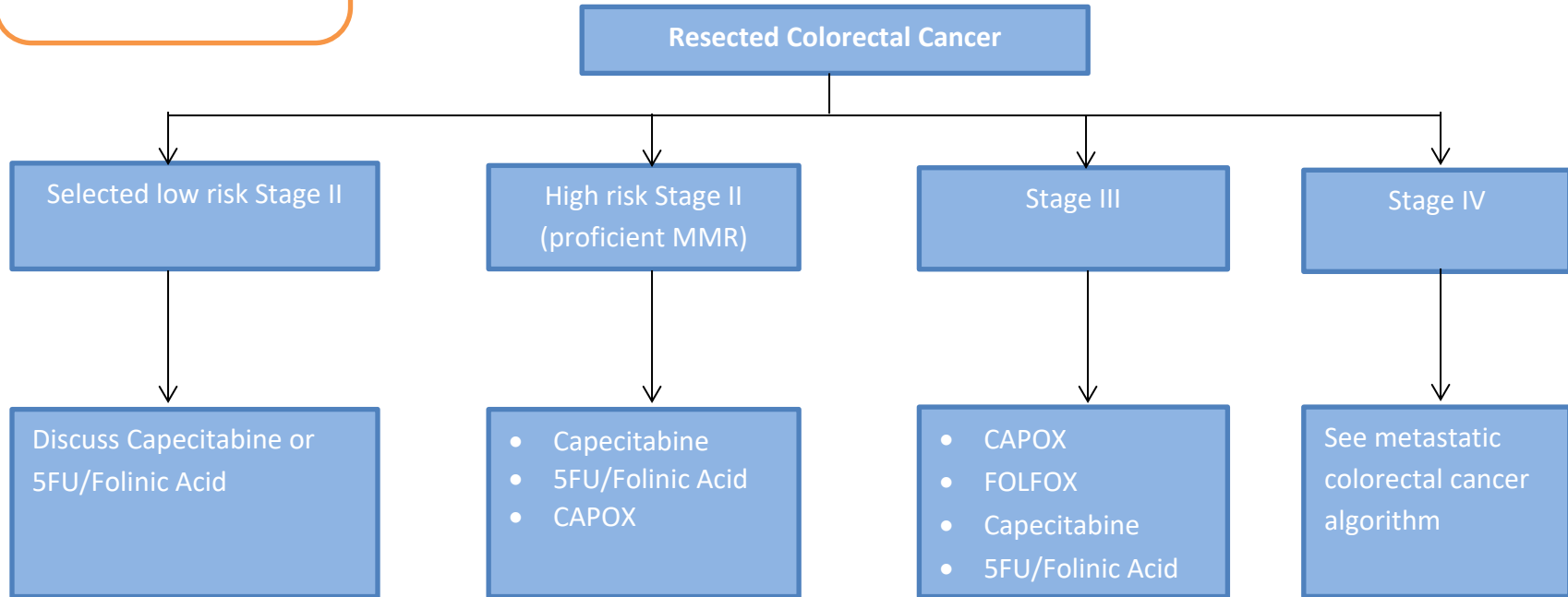


Updated May 2022 (DW)

Recruitment to clinical trials should be considered where appropriate

MMR/MSI status
DPYD mutation analysis

Adjuvant Colorectal Chemotherapy Algorithm



Consider adjuvant chemotherapy for rectal cancer based on pre-treatment clinical staging

Updated May 2022 (DW)

Recruitment to clinical trials should be considered where appropriate

Metastatic Colorectal Cancer Chemotherapy Algorithm

MMR/MSI status
DPYD mutation analysis
Mutation analysis
RAS, BRAF

NTRK

Metastatic Colorectal Cancer

Un-resectable metastatic disease

MMR proficient/MSI low

MMR deficient/MSI high

1st line

- Oxaliplatin or Irinotecan based combination chemotherapy
- Single agent Capecitabine or 5FU/Folinic Acid
- FOLFOXIRI
- Raltitrexed (alone or in combination with oxaliplatin)

RAS WT
Add EGFR antibody ¹ to chemotherapy

Pembrolizumab ³

2nd line

- Switch to alternative Irinotecan or Oxaliplatin combination therapy
- Consider referral for further mutation analysis/Clinical trials

BRAF V600 mutation
Encorafenib +cetuximab ²

Nivolumab + Ipilimumab ⁴

3rd line

- Trifluridine/tipiracil ⁵
- Re-challenge with previous effective regime
- Regorafenib
- Consider referral for clinical trials

- Oxaliplatin or Irinotecan based combination chemotherapy
- Single agent Capecitabine
- Raltitrexed (alone or in combination with oxaliplatin)

Subsequent

- Previously unused regimen
- Re-challenge with previous effective regime

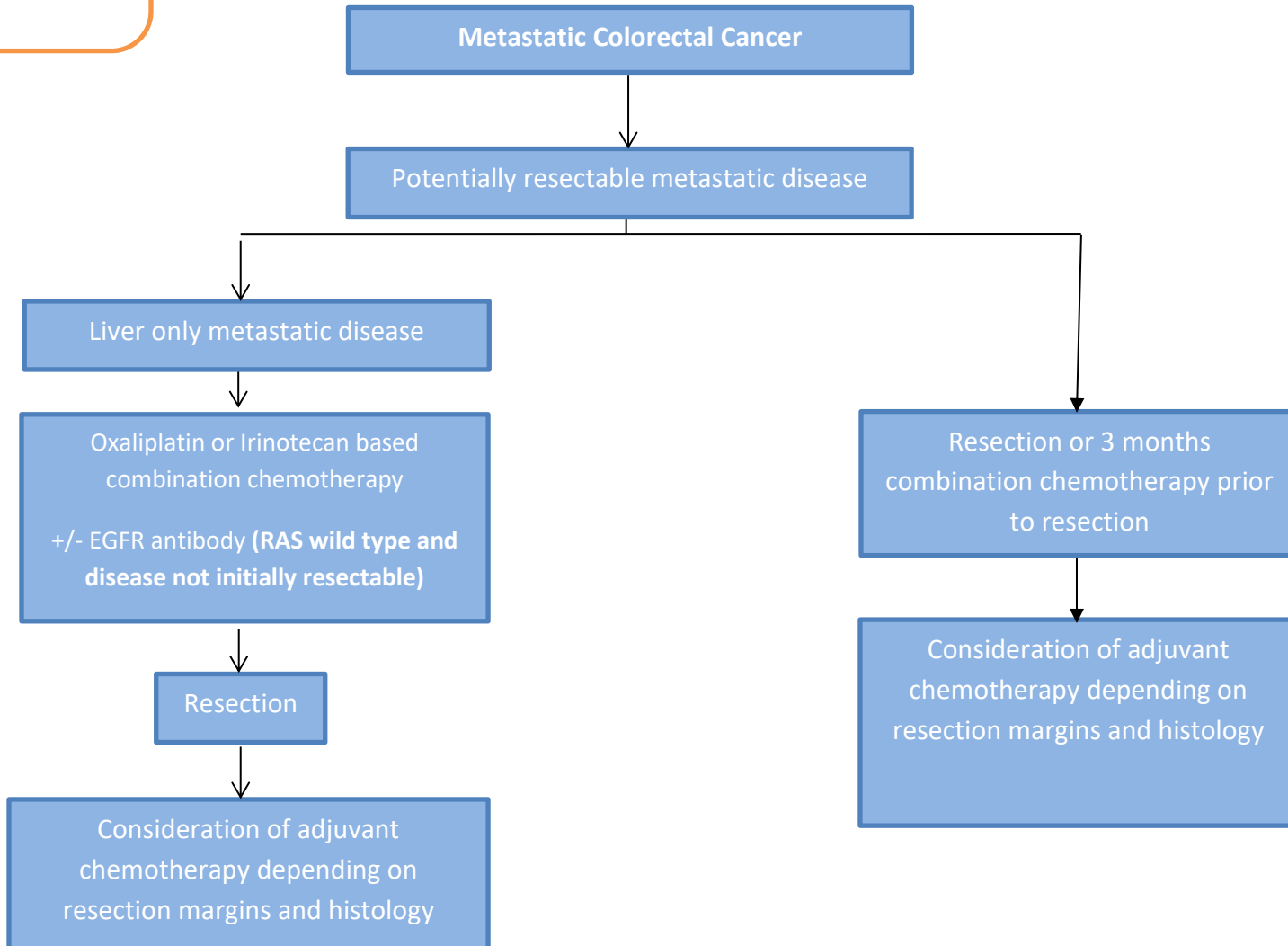
Updated May 2022 (DW)

Recruitment to clinical trials should be considered where appropriate

1. NICE TA439 (25/9/2017)
2. NICE TA668 (6/1/2021)
3. NICE TA770 (23/6/2021)
4. NICE TA716 (28/7/2021)
5. NICE TA405 (24/8/2016)

MMR/MSI status
DPYD mutation analysis
Mutation analysis
RAS, BRAF

Metastatic Colorectal Cancer Chemotherapy Algorithm



Updated May 2022 (DW)

Recruitment to clinical trials should be considered where appropriate

