

# Lancashire & South Cumbria Cancer Network

## Systemic Anticancer Treatment Protocol

### Drug regimen

Cisplatin 100mg/m<sup>2</sup> with concurrent radiotherapy

### Indication for use

Head and neck cancer

### Regimen

DRUG	FLUID	TIME
Furosemide 40mg orally	n/a	stat
Potassium chloride 20mmol + magnesium sulphate 10mmol	1 litre 0.9% Sodium chloride	2 hours
Cisplatin 100mg/m <sup>2</sup>	1 litre 0.9% Sodium chloride	2 hours
Potassium chloride 20mmol + magnesium sulphate 10mmol	1 litre 0.9% Sodium chloride	2 hours
	500ml 0.9% sodium chloride	1 hour

Every 21 days for 2 to 3 cycles

### Investigation prior to initiating treatment

U&Es, FBC and calculated creatinine clearance (Cl<sub>Cr</sub>), consider audiometry

### Cautions

Cl<sub>Cr</sub> see below

### Investigations and consultations prior to each cycle

FBC, U&Es, calculated creatinine clearance

FBC and U&Es on day 3 and then weekly on the same day each week

**Acceptable levels for treatment to proceed** (if outside these levels defer one week or contact consultant)

Haematological toxicity:

Neutrophils		Platelets	Cisplatin dose
≥ 1.5	AND	≥ 100	100%
1.0 – 1.4	OR	50 – 99	Delay chemotherapy 1 week, continue XRT Repeat FBC. If within normal parameters resume cisplatin at 80% dose
< 1.0	OR	< 50	Delay chemotherapy for 1 week, continue XRT. Repeat FBC If within normal parameters, resume cisplatin at 60% dose

## Renal Impairment

Calculated creatinine clearance	Cisplatin Dose
> 60	100%
50 – 60	80%
< 50	Contraindicated

## Other toxicities

Grade	Neuropathy-sensory	Ototoxicity	Cisplatin dose
1	Parasthesia (including tingling) but not interfering with function		100%
2	Paresthesia interfering with function but not interfering with activities of daily living	Tinnitus not interfering with activities of daily living	80%
3	Paresthesia interfering with activities of daily living	Tinnitus interfering with activities of daily living	Consider changing cisplatin to carboplatin AUC5. Discuss with consultant
4	Disabling	Disabling	Consider changing cisplatin to carboplatin AUC5. Discuss with consultant

## Side Effects

Myelosuppression; fatigue; nausea; vomiting; constipation; diarrhoea; nephrotoxicity; neuropathy / ototoxicity; taste disturbance; electrolyte disturbances; allergic reactions; alopecia

## Dose Modification Criteria

See above

## Specific Information on Administration

Record fluid balance whilst the patient is on the unit. If output <100ml/hr then consider giving additional 20mg furosemide

Encourage oral hydration during treatment e.g. a glass of water every hour during treatment and at least a further 2 litres over the 24 hours following treatment

**THIS PROTOCOL HAS BEEN DIRECTED BY DR MIRZA clinical oncologist**

**RESPONSIBILITY FOR THIS PROTOCOL LIES WITH THE HEAD OF SERVICE**

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