

Lancashire & South Cumbria Cancer Network Systemic Anticancer Treatment Protocol

Drug regimen

Weekly cisplatin (cervix)

Indications for use

To be used concurrently with radiotherapy for patients with locally advanced and metastatic cancer of the cervix and locally advanced squamous cell carcinoma of the vulva

Regimen

DRUG	FLUID	TIME
20mmol potassium chloride + 10mmol magnesium sulphate	1 litre 0.9% sodium chloride	2 hours
Cisplatin 40mg/m ²	500ml 0.9% sodium chloride	1 hour
20mmol potassium chloride + 10mmol magnesium sulphate	1 litre 0.9% sodium chloride	2 hours

Repeated weekly concurrently with radiotherapy for 5 cycles

Additional medication:

Filgrastim 5mcg/kg sc od on the Saturday and Sunday after external beam radiotherapy completed

Investigations prior to initiating treatment

FBC and calculated creatinine clearance (Cl_{Cr})
(must be within 7 days of start of treatment)

Cautions

Cl_{Cr} see below

Investigations and Consultations prior to each cycle

FBC, U&Es

Calculated creatinine clearance every 2 weeks; repeat if serum creatinine raises > 20%

Acceptable limits for treatment to proceed (if outside these delay one week or contact consultant)

At Consultant's direction:

Defer treatment 1 week until neutrophils ≥ 1.5 and platelets ≥ 100

If neutrophils 1.2-1.5 contact **consultant**

Calculated creatinine clearance >50 (see dose modifications below)

Nb. Hb must be maintained at 12.0g/dl. If Hb low proceed with chemotherapy but arrange for transfusion within 2 working days

Side Effects

Nausea and vomiting

Rarely:

- Renal impairment
- Hearing loss
- Neuropathy

Dose Modification Criteria

Renal Impairment:

Calculated Creatinine Clearance	
>50	Give full dose cisplatin
40-49	Dose as per clearance e.g. if CrCl = 43, give 43mg cisplatin
<40	Change to carboplatin AUC2

**THIS PROTOCOL HAS BEEN DIRECTED BY DR YIANNAKIS, CONSULTANT CLINICAL ONCOLOGIST
RESPONSIBILITY FOR THIS PROTOCOL LIES WITH THE HEAD OF SERVICE**

**DATE January 2020
REVIEW January 2022
VERSION 17**