

Lancashire & South Cumbria Cancer Network Systemic Anticancer Treatment Protocol

Drug regimen

Docetaxel and carboplatin

Indications for use

Ovarian cancer, primary peritoneal cancer, fallopian tube cancer, endometrial cancer, cervical cancer (in patients who have documented hypersensitivity to paclitaxel)

Regimen

Pre-medicate with 8mg dexamethasone twice daily orally for 3 days starting 24 hours before docetaxel

Pre-warn resus team of potential for severe allergic reaction

Ensure patient has 2 Venflons in

Give cetirizine 20mg orally 1 hour pre-docetaxel and dexamethasone 8mg IV 30 minutes before docetaxel

DRUG	FLUID	TIME
Docetaxel 75mg/m ²	250mls Sodium chloride 0.9%	1 hour
Carboplatin (AUC 5)	500mls Glucose 5%	1 hour

Filgrastim 5mcg/kg sc daily on days 8-12 or depending on nadir counts / previous episodes of myelosuppression

Maximum dose of carboplatin=890mg

Cycle should be repeated every 3 weeks for 6 cycles

Investigation prior to initiating treatment

FBC

U&Es, Calculated creatinine clearance

LFTs

Magnesium

Random glucose or BM stix

CA125

Cautions

In the event of severe neuropathy or severe hypersensitivity reactions it may be necessary to discontinue docetaxel.

There is a 10% cross reactivity risk i.e. allergic reaction with paclitaxel.

The Calvert formula is not considered reliable if the creatinine clearance is <40 ml/min. However, prescribing according to surface area leads to excessive doses. Therefore, even in those patients with renal impairment the Calvert formula will be used and doses modified subsequently up or down depending on blood counts

Investigations and consultations prior to each cycle

FBC and U&E

If serum creatinine raised >10% repeat calculated creatinine clearance before next cycle

LFTs

Calcium, Phosphate, magnesium

Random glucose or BM stix

CA125 (looked at retrospectively)

Consultation needed prior to each cycle

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

Delay treatment 1 week or until platelets \geq 100 and neutrophils \geq 1.5

AST/ALT < 2.5 X ULN

Bilirubin \leq N

Side effects

Bone marrow suppression
Hypersensitivity reactions
Taste disturbance
Oedema
Fatigue
Myalgia
Nail changes
Stomatitis
Neuropathy
Alopecia
Nausea and vomiting
Diarrhoea
Constipation

Dose Modification Criteria

20% reduction of docetaxel in the event of neutropenia and 20% reduction of carboplatin in the event of thrombocytopenia

Specific Information on Administration

Docetaxel must be given before carboplatin

THIS PROTOCOL HAS BEEN DIRECTED BY DR YIANNAKIS, DESIGNATED LEAD CLINICIAN FOR GYNAECOLOGICAL CANCER

RESPONSIBILITY FOR THIS PROTOCOL LIES WITH THE HEAD OF SERVICE

DATE **January 2020**
REVIEW **January 2022**
VERSION **1**