

Chemotherapy Protocol

Regimen

Doxorubicin and cyclophosphamide (AC)

Indications for use

Adjuvant therapy for early breast cancer

Regimen

DRUG

Doxorubicin 60mg/m² IV bolus

Cyclophosphamide 600mg/m² IV bolus

Filgrastim 5mcg/kg subcutaneously x 5 days (starting day 3)

Regimen to be given three weekly for 4 cycles

Investigation prior to initiating treatment

FBC, U&Es, LFT, Echocardiogram/ MUGA Scan (see protocol), weight, venous access assessment

Cautions

Pre-existing cardiac morbidity

LVEF < 50%

Altered LFT

Investigations prior to each cycle

FBC, U&Es, LFT

Side Effects

Myelosuppression, cardiotoxicity, mucositis, stomatitis, nausea, vomiting, diarrhoea, alopecia, urine discolouration, potential risk of infertility/early menopause, skin sensitivity to sun exposure

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

ANC > 1.0 and PLT > 100

Administration of chemotherapy to be delayed until:

Neutrophil > 1.0 and platelets >100

Dose Modification Criteria

Consider 20% dose reduction if:

Chemotherapy delayed for more than one week for recovery of count.

Two or more delays

Withdrawal of treatment:

Recurrent grade 3 or grade 4 toxicity despite dose modification

Life threatening complications

Specific Information on Administration

Doxorubicin is a vesicant and should be administered first via a fast running drip.

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Cyclophosphamide and doxorubicin protocol (AC)

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