

## Chemotherapy protocol

### **Drug regimen**

Caelyx (liposomal doxorubicin)

### **Indications for use**

Relapsed ovarian cancer

### **Contraindications**

Hypersensitivity to peanut or soya

### **Regimen**

Caelyx 50mg/m<sup>2</sup> in 250-500mls (see below) 5% Dextrose over 1 hour\*

Repeat regimen every 4 weeks for 6 cycles

\*To minimise the risk of infusion reactions, the initial dose is administered at a rate no greater than 1mg/minute. If no infusion reaction is observed, subsequent Caelyx infusions may be administered over a 60-minute period.

In those patients who experience an infusion reaction, the method of infusion should be modified as follows:

5% of the total dose should be infused slowly over the first 15 minutes. If tolerated without reaction, the infusion rate may then be doubled for the next 15 minutes. If tolerated, the infusion may then be completed over the next hour for a total infusion time of 90 minutes

### **Investigation prior to initiating treatment**

FBC  
LFTs

### **Investigations and consultations prior to each cycle**

FBC (neutrophils should be  $> 1.5$  platelets  $> 100$ )

Consultation prior to each cycle

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

Administration should be delayed until neutrophils  $\geq 1.5$  and platelets  $\geq 100$   
If Neutrophils 1.2 – 1.5 contact **consultant**

### **Side Effects**

Myelosuppression  
Hand-foot syndrome  
Stomatitis

Infusion reactions (see below)

**Dose Modification Criteria**

20% dose reduction if chemotherapy is delayed by more than two weeks

**Specific advice on administration**

For doses < 90 mg: dilute Caelyx in 250ml 5% dextrose

For doses  $\geq$  90 mg: dilute Caelyx in 500ml 5% dextrose

In-line filters (0.2micron) must not be used

**Infusion-associated reactions**

Serious and sometimes life-threatening infusion reactions, which are characterised by allergic-like or anaphylactoid-like reactions, with symptoms including asthma, flushing, urticarial rash, chest pain, fever, hypertension, tachycardia, pruritus, sweating, shortness of breath, facial oedema, chills, back pain, tightness in the chest and throat and/or hypotension may occur within minutes of starting the infusion of Caelyx.

Very rarely, convulsions also have been observed in relation to infusion reactions. Temporarily stopping the infusion usually resolves these symptoms without further therapy.

However, medications to treat these symptoms (e.g. antihistamines, corticosteroids, adrenaline, and anticonvulsants), as well as emergency equipment should be available for immediate use.

In most patients treatment can be resumed after all symptoms have resolved, without recurrence. Infusion reactions rarely recur after the first treatment cycle. To minimise the risk of infusion reactions, the initial dose should be administered at a rate no greater than 1mg/minute

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

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

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