

Chemotherapy protocol

DRUG REGIMEN

Cisplatin and gemcitabine for ovarian cancer

Indication for use

Platinum resistant ovarian cancer

Regimen

Drug	Route	Fluid	Time
Gemcitabine 1000mg/m ²	IV	250ml 0.9% sodium chloride	30 minutes
20mmol potassium chloride + 10mmol magnesium sulphate	IV	1 litre 0.9% sodium chloride	2 hours
Cisplatin 35mg/m ²	IV	500ml 0.9% sodium chloride	1 hour
20mmol potassium chloride + 10mmol magnesium sulphate	IV	1 litre 0.9% sodium chloride	2 hours

Given on days 1 & 8 every 3 weeks for 6 cycles

Investigation prior to initiating treatment

FBC, U&Es, LFTs

Cautions

Patients must have adequate renal and hepatic function

Investigations and consultations prior to each treatment (i.e. days 1 & 8)

FBC

U&Es

LFTs

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

Day 1:

Neutrophils ≥ 1

Platelets ≥ 100

Creatinine clearance ≥ 50

Bilirubin $\leq 1.5 \times \text{ULN}$

ALT +/- Alk Phos $< 5 \times \text{ULN}$

Day 8:

Neutrophils		Platelets	Gemcitabine dose	Cisplatin dose
≥ 1	And	>100	100%	100%
0.5 – 1	Or	50 – 100	75%	100%
< 0.5	Or	<50	Omit	Omit

Side Effects

Nausea, myelosuppression, asthenia, alopecia

Dose Modification Criteria

Omit cisplatin if $Cl_{Cr} < 50$

Consider 25% dose reduction of gemcitabine if treatment delayed

Specific Information on Administration

Gemcitabine must be given over 30 minutes. Longer infusion times lead to increased toxicity

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

RESPONSIBILITY FOR THIS PROTOCOL LIES WITH THE HEAD OF SERVICE

DATE December 2017

REVIEW December 2019

VERSION 2