

## Chemotherapy Protocol

### Drug regimen

Topotecan and carboplatin

### Indications for use

Relapsed ovarian cancer  
Advanced/relapsed cervical cancer  
Advanced endometrial cancer

### Regimen

#### Day 1

Drug	Fluid/Route	Time
Dexamethasone 4mg	IV	
Ondansetron 8mg	IV	
Topotecan 1.25mg/m <sup>2</sup>	IV 100ml 0.9% sodium chloride	30 mins

#### Day 2

Dexamethasone 4mg	IV	
Ondansetron 8mg	IV	
Topotecan 1.25mg/m <sup>2</sup>	IV 100ml 0.9% sodium chloride	30 mins

#### Day 3

Dexamethasone 8mg	IV	
Ondansetron 8mg	IV	
Topotecan 1.25mg/m <sup>2</sup>	IV 100ml 0.9% sodium chloride	30 mins
Carboplatin AUC5	IV 500ml 5% dextrose	1 hour

Regimen to be repeated 3 weekly for 6 cycles  
Give GCSF on days 10-14 inclusive

### Investigation prior to initiating treatment

FBC, U&Es, LFTs, Calculated creatinine clearance

### Cautions

Renal impairment  
Liver function impairment

### Investigations and consultations prior to each cycle

FBC, U&Es, LFTs, Calculated creatinine clearance, calcium, phosphate, magnesium, medical/nurse review  
CT scan every 3-4 cycles

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

Neutrophils  $\geq 1.5$ , platelets  $\geq 100$ , Hb  $> 90$

If neutrophils 1.2 – 1.5 contact **consultant**

### **Side Effects**

Myelosuppression, alopecia, emesis, electrolyte including Magnesium disturbance, thrombosis, extravasation, stomatitis

### **Dose Modification Criteria**

Reduce dose of topotecan by 20%:

- following an episode of febrile neutropenia
- if delayed for more than 1 week due to toxicity
- if platelets fall below 50
- if patient is heavily pretreated

Reduce dose of carboplatin following prolonged thrombocytopenia

Renal impairment and topotecan:

Creatinine clearance

<20ml/min—avoid topotecan

20-39 ml/min 50% dose

40-59 ml/min 80% dose

Hepatic impairment and topotecan:

Severely impaired hepatic function- avoid

Bilirubin over 25 micromol/litre to 50 micromol /litre -dose reduce or avoid, clinician directed

### **Specific Information on Administration**

Carboplatin must be given after topotecan

**THIS PROTOCOL HAS BEEN DIRECTED BY DR YIANNAKIS, Lead CLINICIAN FOR GYNAECOLOGICAL CANCER**

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

**DATE        September 2017**  
**REVIEW     September 2019**  
**VERSION    2**