

# MELPHALAN, THALIDOMIDE & PREDNISOLONE (MTP)

**INDICATION:** Myeloma

## Prior to a course of treatment

- Check FBC, U&Es, creat – *see dose modification - discuss with consultant if there is renal impairment*
- Women of child-bearing age must have a negative pregnancy test
- Discuss the need for contraception with both male and female patients. Discuss risk of infertility - offer semen cryopreservation to male patients
- In the absence of prior cytotoxic therapy cytopenias probably reflect marrow infiltration therefore give at least first cycle at full dose.
- Written consent for course

## Prior to each cycle

- Medical review of fitness for chemotherapy – exclude active infection, major changes in organ function
- Women of child-bearing age must have a negative pregnancy test
- Check FBC – neutrophils must be  $> 1.0$ , platelets  $> 75$  - *see dose modification*
- Encourage patient to drink 3L fluid daily

Melphalan*	7mg/m <sup>2</sup> od	PO	days 1-4
Thalidomide**	50 - 200mg	PO	days 1 - 28
Prednisolone	40mg od	PO	days 1-4

**Repeat cycle every 28 days for up to 12 cycles**

\*tablets are 2mg

\*\*Do not prescribe more than 28 days Thalidomide at any time

***Prescription of Thalidomide & counseling must be in accordance with the Celgene Thalidomide Pregnancy Prevention Programme.***

**Prophylaxis for acute & delayed emesis**

Metoclopramide

**Other medications**

Allopurinol 300mg od (100mg if Cr.Cl  $< 20$ ml/min) for 4 days with cycle 1

## Dose modifications for haematological toxicity (unless considered due to marrow infiltration)

- If neutrophils  $< 1.0$  and/or platelets  $< 75$  Delay treatment for up to 2 weeks
- If there is treatment delay  $> 2$  weeks due to neutropenia on  $> 1$  occasion Consider GCSF for 2-3 days per cycle

## Dose modification for renal dysfunction

- If creatinine  $> 200\mu\text{mol/L}$  despite rigorous hydration initially reduce dose of melphalan to 5mg/m<sup>2</sup>
- Then consider titrating dose according to haematological toxicity

**Melphalan, Thalidomide & Prednisolone Toxicities**

Neutropenic sepsis & thrombocytopenia	Nausea (none-mild)
Alopecia (uncommon)	Amenorrhoea & infertility (offer semen cryopreservation)
Sedation / somnolence	Rash
Constipation	Hyperglycaemia
Mucositis	Peripheral neuropathy
Gastric ulceration	Tremor
Venous thromboembolism	Oedema
Second malignancies (late)	Pulmonary fibrosis (late)

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