

Chemotherapy protocol

Drug regimen

Weekly Carboplatin/paclitaxel

Indications for use

1. First line or relapsed ovarian cancer where patients are not fit for 3 weekly carboplatin or 3 weekly paclitaxel or where benefits of weekly paclitaxel are needed.
2. First line (or rarely second line) lung cancer where patients are not fit for 3 weekly carboplatin or 3 weekly paclitaxel or where benefits of weekly paclitaxel are needed.
3. Cervical cancer pre concurrent chemoradiotherapy or at relapse where patients are not fit for 3 weekly carboplatin or 3 weekly paclitaxel or where benefits of weekly paclitaxel are needed.
4. Endometrial cancer where patients are not fit for 3 weekly carboplatin or 3 weekly paclitaxel or where benefits of weekly paclitaxel are needed.

Nb: This is an unlicensed use of paclitaxel and should only be considered where 3 weekly paclitaxel is inappropriate.

Regimen

Week 1

Pre-medicate 30 mins pre chemo with:

Dexamethasone 10mg	IV in 100ml 0.9% sodium chloride
Chlorphenamine 10mg	I.V. bolus
Ranitidine 50mg	50mls 0.9% Sodium chloride

For subsequent weeks reduce dexamethasone dose as below. (If patient experiences any hypersensitivity reaction do not reduce the dose further, seek advice from consultant).

Week 2+

Dexamethasone 8mg
Chlorphenamine 10mg IV bolus
Ranitidine 50mg in 50ml 0.9% sodium chloride

DRUG	FLUID	TIME	ROUTE
Paclitaxel 80mg/m ²	250mls 0.9% sodium chloride	1 hour	IV
Carboplatin AUC 2	250-500mls 5% Glucose	1 hour	IV

Regimen to be given weekly, usually six weeks on 1 week off, for an initial period of 6-12 treatment weeks (depending on indication)

Only uncommonly will patients proceed to 18 weeks of treatment. In general try not to reduce doses, if need to reduce intensity then do 3-4 weeks on, 1 week off

Investigation prior to initiating treatment

FBC, U&Es, LFTs, calcium, random glucose

Investigations and consultations prior to each cycle

FBC U&Es and LFTs
Calcium, random glucose and Mg 3 weekly
Consultation needed every 3 cycles i.e. pre week 4 etc.

Bloods to be checked the day before so that results are available pre-chemotherapy

Acceptable levels for treatment proceed

(If outside these levels delay one week or contact consultant)

Delay treatment 1 week or until platelets ≥ 80 and neutrophils ≥ 0.8

If neutrophils drop rapidly consider filgrastim, 2-3 doses commencing 48-72 hours post chemo, allow a 48 hour gap between filgrastim and chemotherapy

Side effects

Hypersensitivity reactions, myalgia, neuropathy, alopecia, nausea and vomiting, fatigue, bone marrow suppression, skin reaction, osteoporotic fractures, constipation

Dose Modification Criteria

In general try not to reduce doses, if need to reduce intensity then do 3-4 weeks on, 1 week off.

In the event of severe neuropathy or severe hypersensitivity reactions it may be necessary to discontinue/ reduce paclitaxel.

Allergic reactions can also happen to carboplatin.

Patients can get skin reaction that may be overcome by reducing paclitaxel dose

Additional medications

Ondansetron 8mg bd 2 days

Metoclopramide 10mg tds prn

PPI (or ranitidine), mouth washes and laxatives as indicated

Specific Information on Administration

Use non PVC IV giving set with paclitaxel

Give paclitaxel before carboplatin

**THIS PROTOCOL HAS BEEN DIRECTED BY DR. YIANNAKIS, CONSULTANT ONCOLOGIST
RESPONSIBILITY FOR THIS PROTOCOL LIES WITH THE HEAD OF SERVICE**

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