

Vinorelbine/Cisplatin concurrent

INDICATION: Non-small cell lung cancer Stage III with concurrent thoracic radiotherapy

Prior to a course of chemotherapy

- Baseline bloods: FBC, U&E, LFT, Ca, Mg
- Creatinine clearance \geq 60ml/min
- CT thorax
- If appropriate discuss need for contraception and risk of infertility (offer sperm banking for males)
- Written informed consent for course

Weekly

- FBC, U&E, LFT, Ca, Mg
- Creatinine clearance \geq 50ml/min (before final week of Cisplatin)
- Medical review

Vinorelbine	40mg/m²	Oral	Day 1,8,19,26 (Fraction 1,6,15,20)
		1 litre sodium chloride 0.9% with potassium chloride 20mmol and magnesium sulphate 10mmol over 2 hours	
Cisplatin	20mg/m²	1 litre sodium chloride 0.9% over 4 hours	Day 1-4 and 22-25 (Fraction 1-4 and 16-19)
		500ml sodium chloride 0.9% with potassium chloride 10mmol and magnesium sulphate 5mmol over 1 hour	

Radiotherapy has to start within 6 hours of Cisplatin infusion

Treatment should start on a Monday

Maintain Hb > 12g/dl throughout treatment

Dose modification for haematological toxicity

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| • Neutrophils > 1.5 AND Platelets > 100 | Proceed with full dose |
| • Neutrophils 0.8-1.5 OR Platelets 60-100 | Omit Vinorelbine, full dose Cisplatin |
| • Neutrophils < 0.8 OR Platelets <60 | Omit chemo |

Dose modification for hepatic toxicity

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| • AST/ALT up to 5 x ULN, Bilirubin < 1.5xULN | Full dose |
| • AST/ALT 5.1-20 x ULN, Bilirubin 1.5-3 x ULN | Defer Vinorelbine by 1 week, full dose Cisplatin |
| • AST/ALT > 20xULN, Bilirubin > 3ULN | Discontinue Vinorelbine, continue Cisplatin if clinically indicated (and renal function adequate) |

Dose modification for neurological toxicity

Lancashire & South Cumbria Cancer Network
Systemic Anticancer Treatment Protocol

<ul style="list-style-type: none">• NCI grade 0-1	Proceed with full dose
<ul style="list-style-type: none">• NCI grade 2+	Defer until recovery, then replace Cisplatin with Carboplatin AUC5
Dose modification for renal toxicity	
<ul style="list-style-type: none">• Creatinine clearance >60ml/min	Full dose
<ul style="list-style-type: none">• Creatinine clearance 50-59 ml/min	Full dose Vinorelbine, 75% dose Cisplatin
<ul style="list-style-type: none">• Creatinine clearance <50ml/min	Full dose Vinorelbine, replace Cisplatin with Carboplatin AUC5 (day 23 only)

Expected toxicities	
Neutropenic sepsis & thrombocytopenia	Nausea & vomiting (severe)
Constipation	Peripheral neuropathy
Alopecia	Mucositis
Tinnitus	Oesophagitis

This protocol has been reviewed by the Lancashire & South Cumbria Lung Oncology Consultants' Group and responsibility for the template lies with the Head of Service.

Date: August 2019
Next review: August 2021