

Chemotherapy protocol

Drug regimen

Weekly paclitaxel (sarcoma and upper GI)

Indications for use

Angiosarcoma

Palliative gastric or gastro-oesophageal junction (GOJ) adenocarcinoma

Regimen

Prior to first dose pre-medicate 30 mins pre chemo with:

Chlorphenamine 10mg I.V. bolus
Ranitidine 50mg in 50mls 0.9% NaCl
Dexamethasone 20mg in 100mls 0.9% NaCl

For subsequent weeks reduce dexamethasone dose as below. If patient experiences any hypersensitivity reaction do not reduce the dose further but continue on the same dose. If severe reaction consider increasing pre-med dose back to 20mg

Week 2 dexamethasone 8mg in 100mls 0.9% sodium chloride

Week 3 dexamethasone 4mg in 100mls 0.9% sodium chloride

If tolerated, subsequent doses may be given without steroid premedication

DAY	DRUG	FLUID	TIME	ROUTE
1,8, & 15	Paclitaxel 80mg/m ²	250mls 0.9% sodium chloride	1 hour	I.V

Repeat cycle every 28 days, continue until disease progression

Investigation prior to initiating treatment

FBC

U&Es

LFTs

Calcium

Cautions

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

Investigations and consultations prior to each cycle

FBC

Consultation needed prior to each cycle

U&Es and LFTs

The U&Es and LFTs may be retrospectively looked at (i.e. after the chemotherapy treatment)

unless they are known to be abnormal, then they need 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 ≥ 100 and neutrophils ≥ 1.5

If Neutrophils 1.2 – 1.5 contact **consultant**

Side effects

Hypersensitivity reactions, myalgia, neuropathy, alopecia, nausea and vomiting, fatigue, bone marrow suppression

Dose Modification Criteria

Reduce dose by 25% if prolonged delays due to neutropenia

Withhold in the event of grade ≥ 2 neuropathy and restart at 25% dose reduction when resolved to grade ≤ 1

Specific Information on Administration

Important – Use non PVC IV giving set with paclitaxel.

THIS PROTOCOL HAS BEEN DIRECTED BY DR PARIKH, CLINICIAN FOR SARCOMA

RESPONSIBILITY FOR THIS PROTOCOL LIES WITH THE HEAD OF SERVICE

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