

## Regimen Reference Order – GAST – CISplatin + fluorouracil

ARIA: GAST – [CISplatin + fluorouracil (anal protocol)]

Planned Course: Every 28 days for 6 cycles

Indication for Use: Anal Cancer Metastatic

CVAD: Required (Ambulatory Pump)

### **Proceed with treatment if:**

- ANC equal to or greater than  $1.5 \times 10^9/L$  AND Platelets equal to or greater than  $100 \times 10^9/L$
  - Creatinine clearance greater than 45 mL/minute
- ❖ Contact Physician if parameters not met

## SEQUENCE OF MEDICATION ADMINISTRATION

### Pre-treatment Requirements

Drug	Dose	CCMB Administration Guideline
Not Applicable		

### Treatment Regimen – GAST – CISplatin + fluorouracil

Establish primary solution 500 mL of: normal saline

Drug	Dose	CCMB Administration Guideline
<b>Day 1</b>		
magnesium sulfate	2 g	IV in normal saline 1000 mL over 2 hours (Pre hydration)
aprepitant	125 mg	Orally 1 hour pre-chemotherapy
ondansetron	16 mg	Orally 30 minutes pre-chemotherapy
dexamethasone	12 mg	Orally 30 minutes pre-chemotherapy
OLANZapine	2.5 mg	Orally 30 minutes pre-chemotherapy
CISplatin	$75 \text{ mg/m}^2$	IV in normal saline 500 mL over 1 hour <i>*Alert: CISplatin infusion must be complete prior to mannitol administration</i>
mannitol	12.5 g	IV in normal saline 1000 mL over 2 hours (Post hydration)
fluorouracil	$4000 \text{ mg/m}^2$	IV in D5W continuously over 96 hours by ambulatory infusion device

Flush after each medication:

- 50 mL over 6 minutes (500 mL/hr)

In the event of an infusion-related hypersensitivity reaction, refer to the 'Hypersensitivity Reaction Standing Order'

## REQUIRED MONITORING

All Cycles

- CBC, serum creatinine, urea, liver enzymes and electrolytes as per Physician Orders
- Baseline blood pressure prior to magnesium infusion and repeat 15 minutes after start of magnesium infusion

### Recommended Support Medications

Drug	Dose	CCMB Administration Guideline
aprepitant	80 mg	Orally once daily on Days 2 and 3
dexamethasone	8 mg	Orally once daily on Days 2, 3 and 4
OLANzapine	2.5 mg	Orally the evening of Day 1 then twice daily on Days 2, 3 and 4. Also use OLANzapine 2.5 to 5 mg AS NEEDED for breakthrough nausea and vomiting (including Days 1 to 4) up to a maximum of 10 mg per day. Contact clinic if nausea/vomiting is not adequately controlled

## DISCHARGE INSTRUCTIONS

- Instruct patient to continue taking anti-emetic(s) at home
- Instruct patient to notify clinic if having significant diarrhea or vomiting
- Reinforce applicable safe handling precautions of medications, blood and body fluids for 48 hours after completion of chemotherapy

## ADDITIONAL INFORMATION

- CISplatin is ototoxic and nephrotoxic
- CISplatin can cause hypomagnesemia