

## Regimen Reference Order – GYNE – PACLitaxel + CISplatin

ARIA: GYNE – [PACLitaxel + CISplatin q 21 days]

Planned Course: Every 21 days for 6 cycles

Indication for Use: Ovarian Cancer or Endometrial Cancer

CVAD: At Provider's Discretion

### Proceed with treatment if:

#### Cycle 1

- 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

#### Cycle 2 and Onwards

- ANC equal to or greater than  $1.2 \times 10^9/L$  AND Platelets equal to or greater than  $75 \times 10^9/L$
- 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 – GYNE – PACLitaxel + CISplatin

Establish primary solution 500 mL of: normal saline

Drug	Dose	CCMB Administration Guideline
magnesium sulfate	2 g	IV in normal saline 1000 mL over 2 hours (Pre hydration)
famotidine	40 mg	Orally 1 hour prior to PACLitaxel
cetirizine	10 mg	Orally 1 hour prior to PACLitaxel
aprepitant	125 mg	Orally 1 hour pre-chemotherapy
ondansetron	16 mg	Orally 30 minutes pre-chemotherapy
OLANzapine	2.5 mg	Orally 30 minutes pre-chemotherapy
dexamethasone	20 mg	IV in normal saline 50 mL over 15 minutes
<b>Wait 30 minutes after completion of IV pre-medication(s) before starting PACLitaxel</b>		
PACLitaxel	$175 \text{ mg/m}^2$	IV in normal saline 500 mL over 3 hours Use non-DEHP bags and non-DEHP administration sets with 0.2 or 0.22 micron filter
CISplatin	$50 \text{ mg/m}^2$	IV in normal saline 500 mL over 1 hour <b>*Alert:</b> CISplatin infusion must be complete prior to mannitol administration

mannitol	12.5 g	IV in normal saline 500 mL over 1 hour (Post hydration) <i>*Alert: diluent volume and duration of infusion are different than standards used in other regimens</i>
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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
- Full vital signs (temperature, heart rate, respiratory rate, blood pressure and O<sub>2</sub> saturation) at baseline and as clinically indicated
- No observation period required after PACLitaxel administration. Patient can be discharged from treatment room whether they had a reaction or not

## 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

- Patients should be instructed to contact their cancer team immediately if symptoms of hypersensitivity reactions occur after discharge
- Instruct patient to continue taking anti-emetic(s) at home
- 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
- PACLitaxel may cause progressive, irreversible neuropathy