Regimen Reference Order – GYNE – pegylated liposomal doxorubicin

ARIA: GYNE – [doxorubicin (peg-liposomal)]

Planned Course: **Every 28 days until disease progression or unacceptable toxicity**
Indication for Use: **Ovarian Cancer Recurrent**

CVAD: At Provider's Discretion

Proceed with treatment if:

Cycle 1

- ***ANC equal to or greater than 1.5 x 10^9/L AND Platelets equal to or greater than 100 x 10^9/L***

Cycle 2 and Onwards

- ***ANC equal to or greater than 1.2 x 10^9/L AND Platelets equal to or greater than 75 x 10^9/L***
  - ❖ **Contact Physician if parameters not met**

Note: Hepatitis B serology results must be reviewed in accordance with CCMB Policy Hepatitis B Monitoring for Oncology and Hematology Patients

SEQUENCE OF MEDICATION ADMINISTRATION

Pre-treatment Requirements

Drug	Dose	CCMB Administration Guideline
Not Applicable		

Treatment Regimen – GYNE – pegylated liposomal doxorubicin

Establish primary solution 500 mL of: D5W

Drug	Dose	CCMB Administration Guideline	
dexamethasone	8 mg	Orally 30 minutes pre-chemotherapy	
doxorubicin, peg-liposomal (pegylated liposomal doxorubicin)	40 mg/m^2	**Dose less than 90 mg:** IV in D5W 250 mL	**First Dose:** Over 90 minutes *(Maximum rate 1 mg/minute)*
			Subsequent Doses (if no reaction): Over 1 hour
		Dose greater than or equal to 90 mg: IV in D5W 500 mL	**First Dose:** Over 2 hours *(Maximum rate 1 mg/minute)*
			Subsequent Doses (if no reaction): Over 1 hour

All doses will be automatically rounded that fall within CCMB Approved Dose Bands. See Dose Banding document for more information

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

REQUIRED MONITORING

Hepatitis B serology

- Hepatitis B surface antigen and Hepatitis B core antibody (drawn within preceding 5 years)

All Cycles

- CBC, serum creatinine, urea, electrolytes and liver enzymes as per Physician Orders
- Full vital signs (temperature, heart rate, respiratory rate, blood pressure and O_2 saturation) at baseline and as clinically indicated
- No observation period is required. Patient can be discharged from treatment room if stable whether they had a reaction or not

Recommended Support Medications

Drug	Dose	CCMB Administration Guideline
metoclopramide	10 – 20 mg	Orally every 4 hours as needed for nausea and vomiting

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

- Due to the risk of reactivation of Hepatitis B virus (HBV) while on this treatment regimen, prescriber must adhere to CCMB Policy ***Hepatitis B Monitoring for Oncology and Hematology Patients*** for ordering and interpreting HBV serology and prescribing antiviral prophylaxis