

Regimen Reference Order – SARC – irinotecan + temozolomide

ARIA: SARC – [irinotecan + temozolomide]

Planned Course: Every 21 days until disease progression or unacceptable toxicity

Indication for Use: Ewing Sarcoma Recurrent

CVAD: At Provider’s Discretion

Proceed with treatment if:

Day 1

- ANC equal to or greater than $1.5 \times 10^9/L$ AND Platelets equal to or greater than $100 \times 10^9/L$
- Total bilirubin within normal limits

Day 8

- ANC equal to or greater than $1 \times 10^9/L$ AND Platelets equal to or greater than $75 \times 10^9/L$
- ❖ Contact Physician if parameters not met

SEQUENCE OF MEDICATION ADMINISTRATION

Pre-treatment Requirements

Drug	Dose	CCMB Administration Guideline
Not Applicable		

Treatment Regimen – SARC – irinotecan + temozolomide

Establish primary solution 500 mL of: normal saline

Drug	Dose	CCMB Administration Guideline
Days 1 to 5		
ondansetron	16 mg	Orally 30 minutes prior to temozolomide (Self-administered at home)
dexamethasone	8 mg	Orally 30 minutes prior to temozolomide (Self-administered at home)
temozolomide	100 mg/m ²	Orally <u>at least 1 hour</u> prior to irinotecan on an empty stomach (Self-administered at home)
ondansetron	8 mg	ONLY to be given if ondansetron 16 mg dose was taken more than 8 hours prior to irinotecan Orally 30 minutes prior to irinotecan
atropine	0.6 mg	IV Push over 2 to 3 minutes prior to irinotecan as needed for irinotecan-associated cramping or diarrhea
irinotecan	10 mg/m ²	IV in D5W 50 mL over 1 hour

Days 8 to 12		
ondansetron	16 mg	Orally 30 minutes prior to irinotecan
dexamethasone	8 mg	Orally 30 minutes prior to irinotecan
atropine	0.6 mg	IV Push over 2 to 3 minutes prior to irinotecan as needed for irinotecan-associated cramping or diarrhea
irinotecan	10 mg/m ²	IV in D5W 50 mL over 1 hour
temozolomide (Temodal®) available dosage strengths: 5 mg, 20 mg, 100 mg, 140 mg and 250 mg capsules		
Classification: Cytotoxic, Hazardous		

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

REQUIRED MONITORING

All Cycles

Day 1

- CBC, biochemistry and electrolytes as per Physician Orders

Day 8

- CBC as per Physician Orders (CBC to be drawn on Day 5)

Recommended Support Medications

Drug	Dose	CCMB Administration Guideline
ondansetron	8 mg	Orally three times daily as needed for nausea and vomiting (excluding Days 1 to 5 and Days 8 to 12)
metoclopramide	10 – 20 mg	Orally every 4 hours as needed for nausea and vomiting
loperamide	2 – 4 mg	Orally as directed below

DISCHARGE INSTRUCTIONS

- Instruct patient to continue taking anti-emetic(s) at home
- If cramping or diarrhea occurs within 24 hours of irinotecan administration:
 - Contact your cancer care team. A second dose of intravenous atropine may be required
- If cramping or diarrhea occurs more than 24 hours after irinotecan administration:
 - Take loperamide 4 mg (two 2 mg tablets) orally STAT; then
 - During the day: take 2 mg (one 2 mg tablet) orally every 2 hours
 - During the night: take 4 mg (two 2 mg tablets) orally at bedtime and then every 4 hours until morning
 - STOP loperamide once no bowel movement has occurred (i.e. diarrhea-free) for 12 hours
 - If diarrhea has not stopped despite taking **12 tablets (24 mg) of loperamide over a 24 hour period**, please contact your clinic for further instructions. If this occurs after clinic hours, please call the Medical Oncologist on-call and/or report to the nearest emergency room/urgent care centre. Please note that 24 mg per 24 hours is higher than the usual "over the counter" dose for loperamide
- Reinforce applicable safe handling precautions of medications, blood and body fluids for 48 hours after completion of chemotherapy

ADDITIONAL INFORMATION

- Nursing to provide patient with 30 tablet supply of loperamide 2 mg, labelled by Pharmacy, to take home with Cycle 1
- temozolomide is dispensed by CancerCare Manitoba Pharmacy