

# Regimen Reference Order – CUP – gemcitabine + PACLitaxel + CARBOplatin

ARIA: CUP – [gem + CARBO + PACLitaxel]

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

Indication for Use: Carcinoma of Unknown Primary Site (CUP)

CVAD: At Provider’s Discretion

**Proceed with treatment if:**

**ANC equal to or greater than  $1.5 \times 10^9/L$  AND Platelets equal to or greater than  $100 \times 10^9/L$**

❖ Contact Physician if parameters not met

## SEQUENCE OF MEDICATION ADMINISTRATION

### Pre-treatment Requirements

Drug	Dose	CCMB Administration Guideline
Not Applicable		

### Treatment Regimen – CUP – gemcitabine + PACLitaxel + CARBOplatin

Establish primary solution 500 mL of: normal saline

Drug	Dose	CCMB Administration Guideline
<b>Day 1</b>		
famotidine	40 mg	Orally 1 hour prior to PACLitaxel
aprepitant	125 mg	Orally 1 hour pre-chemotherapy
cetirizine	10 mg	Orally 1 hour prior to PACLitaxel
ondansetron	16 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>		
gemcitabine	1000 mg/m <sup>2</sup>	IV in normal saline 250 mL over 30 minutes
PACLitaxel	200 mg/m <sup>2</sup>	IV in normal saline 500 mL over 3 hours <i>Use non-DEHP bags and non-DEHP administration sets with 0.2 or 0.22 micron filter</i>
CARBOplatin	AUC 5 mg/mL.min; maximum dose 750 mg (see table below)	IV in D5W 250 mL over 30 minutes
<b>Day 8</b>		
dexamethasone	8 mg	Orally 30 minutes pre-chemotherapy
gemcitabine	1000 mg/m <sup>2</sup>	IV in normal saline 250 mL over 30 minutes

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

## REQUIRED MONITORING

All Cycles

Day 1

- CBC, serum creatinine electrolytes and liver enzymes as per Physician Orders
- 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 is required after PAclitaxel administration. Patient can be discharged from treatment room if stable whether they had a reaction or not

Day 8

- CBC

### 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 and 3
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

- PAclitaxel may cause progressive, irreversible neuropathy
- CARBOplatin dose considerations:
  - CCMB uses **actual body weight** to calculate GFR
  - CCMB uses a maximum CARBOplatin dose of 750 mg for this regimen
  - If calculated CARBOplatin dose differs **more than 10%** from prescribed CARBOplatin dose, contact the prescriber

**CARBOplatin Dosing Calculations per CCMB**

*Calculation of CARBOplatin dose: (maximum 750 mg)*

Dose (mg) = target AUC (GFR + 25)

$$\text{GFR} = \frac{N \times (140 - \text{age in years}) \times \text{Actual Body Weight (kg)}}{\text{serum creatinine in micromol/L}} = \text{___ mL/min}$$

N = 1.23 in males  
N = 1.04 in females

AUC (mg/mL.min) <hr style="width: 50%; margin: 0 auto;"/>	X	GFR + 25 (mL/min) <hr style="width: 50%; margin: 0 auto;"/> _____ + 25	=	Total Dose (mg) <hr style="width: 50%; margin: 0 auto;"/>
5				

AUC= Area Under Curve

*The estimated creatinine clearance is based on limited evidence. Sound clinical judgment and interpretation of the estimation are required, because the equation may not be appropriate for some patient populations (for example, acute renal failure)*