

GEMCITABINE PACLITAXEL albumin bound

INDICATION (ICD10) C25

The treatment of untreated metastatic pancreatic cancer only if other combination chemotherapies are unsuitable and they would otherwise have gemcitabine monotherapy

2. Confirmed histological or cytological diagnosis of pancreatic adenocarcinoma
3. Metastatic disease (patients with locally advanced disease are ineligible)
4. Not received any previous systemic chemotherapy for the pancreatic cancer unless given as a radiosensitiser in the adjuvant setting and completed at least 6 months previously
5. Nab-paclitaxel is to be used only in combination with gemcitabine
6. Nab-paclitaxel plus gemcitabine is to be used as 1st line treatment only
7. Performance status of 0 or 1
8. Not considered to be a suitable candidate for oxaliplatin- and irinotecan-based combination chemotherapy and would otherwise receive gemcitabine monotherapy
9. No treatment breaks of more than 6 weeks beyond the expected cycle length are allowed (to allow any toxicity of current therapy to settle or intercurrent comorbidities to improve)
10. Nab-paclitaxel to be otherwise used as set out in its Summary of Product Characteristics

REGIMEN

Days 1, 8 and 15

PACLITAXEL ALBUMIN BOUND 125mg/m² IV infusion over 30 minutes

GEMCITABINE 1000mg/m² infusion in 250ml sodium chloride 0.9% (or licensed dose volume) IV infusion over 30 minutes

CYCLE FREQUENCY AND NUMBER OF CYCLES

Every 28 days for up to 6 cycles (may continue)

ANTI-EMETICS

Low risk days 1, 8 and 15

CONCURRENT MEDICATION REQUIRED

Gemcitabine	None required
Paclitaxel albumin bound	None required

EXTRAVASATION AND TYPE OF LINE / FILTERS

Gemcitabine – neutral

Paclitaxel albumin bound – vesicant

Administer palitaxel-albumin bound via a standard giving set with a 15 micron (µm) filter
Peripheral line

INVESTIGATIONS

Blood results required before SACT administration

FBC every dose, U&E, LFTs and creatinine every cycle

Neutrophils x 10⁹/L ≥1.5 on day 1, ≥1.0 on day 8, see dose modifications table on day 15

Platelets x 10⁹/L ≥100 on day 1, ≥75 on day 8, see dose modifications table on day 15

Baseline weight and every cycle

MAIN TOXICITIES AND ADVERSE REACTIONS

Gemcitabine	Diarrhoea – see dose modifications, treat with loperamide or codeine Mucositis – see dose modifications, use routine mouthcare
Paclitaxel albumin-bound	Hypersensitivity - discontinue immediately Bone marrow suppression Peripheral neuropathy Sepsis Pneumonitis

DOSE MODIFICATIONS

Dose Level	Paclitaxel-albumin bound dose (mg/m ²)	Gemcitabine Dose (mg/m ²)
Full dose	125	1000
1 st dose level reduction	100	800
2 nd dose level reduction	75	600
If additional dose reduction required	Discontinue treatment	Discontinue treatment

Haematological

Dose modifications for neutropenia and/or thrombocytopenia at the start of a cycle or within a cycle for patients with pancreatic adenocarcinoma

Cycle Day	ANC count x10 ⁹ /L		Platelet count x10 ⁹ /L	Paclitaxel-albumin bound Dose	Gemcitabine Dose
Day 1	<1.5	OR	<100	Delay doses until recovery	
Day 8	≥0.5 but <1.0	OR	≥50 but <75	Reduce doses 1 dose level	
	<0.5	OR	<50	Withhold doses	
Day 15: If day 8 doses were given without modification:					
Day 15	≥0.5 but <1.0	OR	≥50 but <75	Treat with day 8 dose level and follow with WBC growth factors OR Reduce doses 1 dose level from day 8 doses	
	<0.5	OR	<50	Withhold doses	
Day 15: If day 8 doses were reduced:					
Day 15	≥1.0	AND	≥75	Return to the day 1 dose levels and follow with WBC growth factors OR Treat with same doses as day 8	
	≥0.5 but <1.0	OR	≥50 but <75	Treat with day 8 dose levels and follow with WBC Growth Factors OR Reduce doses 1 dose level from day 8 doses	
	<0.5	OR	<50	Withhold doses	
Day 15: If day 8 doses were withheld:					
Day 15	≥1.0	AND	≥75	Return to day 1 dose levels and follow with WBC growth factors OR Reduce doses 1 dose level from day 1 doses	
	≥0.5 but <1.0	OR	≥50 but <75	Reduce 1 dose level and follow with WBC growth factors OR Reduce doses 2 dose levels from day 1 doses	
	<0.5	OR	<50	Withhold doses	

Non-haematological

Adverse Drug Reaction (ADR)	Paclitaxel albumin-bound dose	Gemcitabine dose
Febrile Neutropenia: Grade 3 or 4	Withhold doses until fever resolves and ANC ≥ 1.5 ; resume at next lower dose level	
Peripheral Neuropathy: Grade 3 or 4	Withhold dose until improves to \leq Grade 1; resume at next lower dose level	Treat with same dose
Cutaneous Toxicity: Grade 2 or 3	Reduce to next lower dose level; discontinue treatment if ADR persists	
Gastrointestinal Toxicity: Grade 3 mucositis or diarrhoea	Withhold doses until improves to \leq Grade 1; resume at next lower dose level	

Hepatic impairment

Gemcitabine

Bilirubin $>27 \mu\text{mol/L}$	initiate treatment with 80% dose
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Paclitaxel-albumin bound

Total bilirubin >1.0 to $\leq 1.5 \times \text{ULN}$ and AST $\leq 10 \times \text{ULN}$	no dose adjustments required.
Total bilirubin >1.5 to $\leq 5 \times \text{ULN}$ and AST $\leq 10 \times \text{ULN}$	give 80% dose The reduced dose may be escalated to the dose for patients with normal hepatic function if the patient is tolerating the treatment for at least two cycles.

Renal impairment

Paclitaxel-albumin bound

CrCl $\geq 30 \text{ml/min}$	No dose reduction
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REFERENCES

1. SPC December 2014
2. Blueteq criteria