DOCETAXEL

INDICATION (ICD10) C15, C16, C34, C49, C50

1. Anthracycline resistant metastatic breast cancer.
2. Second line therapy for NSCLC after failure of platinum containing chemotherapy
3. Second line therapy for oesophago-gastric carcinoma (unlicensed)
4. Palliative treatment of head and neck squamous cell carcinoma (unlicensed)

PS 0, 1, 2

REGIMEN

Day 1 Premedication: Dexamethasone 8mg BD starting 24 hours before chemotherapy (or 20mg IV on day of chemotherapy) and 8mg bd post-chemotherapy for 2 days
DOCETAXEL 75mg/m^2 in 250ml sodium chloride 0.9% IV infusion over 60 minutes

CYCLE FREQUENCY AND NUMBER OF CYCLES

Every 21 days up to 6 cycles

ANTI-EMETICS

Low risk day 1

CONCURRENT MEDICATION REQUIRED

Docetaxel	Ensure premedication given before docetaxel. This can reduce the incidence and severity of fluid retention as well as the severity of hypersensitivity reactions. Loperamide prn every docetaxel cycle

EXTRAVASATION AND TYPE OF LINE / FILTERS

Docetaxel – exfoliant

Filter not required
Peripheral line

INVESTIGATIONS

Blood results required before SACT administration
FBC, U&E and LFTs every cycle
Neutrophils x 10^9/L ≥1.5,
Platelets x 10^9/L ≥100
Baseline weight and every cycle

MAIN TOXICITES AND ADVERSE REACTIONS

Docetaxel	Cutaneous reactions, peripheral neuropathy or fluid retention, hypersensitivity reactions

DOSE MODIFICATIONS

Haematological

Docetaxel
In patients who experienced either febrile neutropenia, neutrophil count <0.5x10^9/L for more than one week, severe or cumulative cutaneous reactions or severe peripheral neuropathy during docetaxel therapy, the dose of docetaxel should be reduced from 75 to 60mg/m². If the patient continues to experience these reactions at 60mg/m², the treatment should be discontinued.

Non haematological

Docetaxel

Discuss dose reductions if severe cutaneous reactions, peripheral neuropathy or fluid retention after previous course.

Hepatic impairment

ALT and/or AST >1.5xULN and ALP >2.5xULN	recommended SPC dose for 100mg/m^2 is give 75mg/m^2
Bilirubin >ULN and ALT or AST >3.5xULN with ALP >6xULN	should not be used unless strictly indicated.

References:

1. NICE technology appraisal guidance 109 September 2006
2. Chevallier, B et al; JCO 1995; 13 (2): 313–322
3. Marty, M et al; JCO 2005; 23 (19): 4265-4274
4. Baselga, J et al; NEJM 2012; 366 (2): 109–119
5. Shepherd F et al. J Clin Oncol 2000; 18: 2095¬2103. Fossella F et al. J Clin Oncol 2000; 18: 2354¬2362