

## GEMCITABINE CARBOPLATIN

### INDICATION (ICD10) C56, C80

1. Metastatic bladder cancer when cisplatin is contra-indicated or unsuitable.
2. Second line onwards treatment of ovarian cancer
3. Unknown primary if appropriate  
PS 0, 1, 2

### REGIMEN

- Day 1 GEMCITABINE 1000mg/m<sup>2</sup> infusion in 250ml sodium chloride 0.9% (or licensed dose volume) IV infusion over 30 minutes  
CARBOPLATIN AUC 5 in 500ml glucose 5% IV infusion over 30 minutes.  
Dose calculated by EDTA GFR or calculated (CrCl + 25) x AUC.  
Non-ovarian indications - maximum dose when using CrCl 125+25 x AUC  
Ovarian cancer - maximum dose when using CrCl is 700mg
- Day 8 GEMCITABINE 1000mg/m<sup>2</sup> infusion in 250ml sodium chloride 0.9% (or licensed dose volume) IV infusion over 30 minutes

NB Ovarian - in heavily pretreated or elderly patients consider reducing gemcitabine doses to 750mg/m<sup>2</sup>.

### CYCLE FREQUENCY AND NUMBER OF CYCLES

Every 21 days for 6 cycles

### ANTI-EMETICS

Moderate risk day 1

Low risk day 8

### CONCURRENT MEDICATION REQUIRED

Carboplatin	Anaphylaxis treatment should be prescribed if the patient has had an anaphylactic episode previously. Dexamethasone 20mg IV bolus Chlorphenamine 10mg IV bolus H <sub>2</sub> antagonist Carboplatin should be given at a slower rate e.g 2-4 hours.
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### EXTRAVASATION AND TYPE OF LINE / FILTERS

Carboplatin - irritant

Gemcitabine – neutral

No filters required

Central or peripheral line

## INVESTIGATIONS

Blood results required before SACT administration

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

Neutrophils  $\times 10^9/L \geq 1.5$  (gynae day 8 neutrophils  $\geq 1$ )

Platelets  $\times 10^9/L \geq 100$  (gynae day 8 platelets  $\geq 75$ )

CA125 baseline and day 1 every cycle for ovarian patients

GFR assessed using EDTA result or calculated creatinine clearance at the Consultant's discretion.

Baseline weight and every cycle

## MAIN TOXICITIES AND ADVERSE REACTIONS

Carboplatin	Ototoxicity – monitor Neurotoxicity - monitor
Gemcitabine	Diarrhoea – see dose modifications, treat with loperamide or codeine Mucositis – see dose modifications, use routine mouthcare

## DOSE MODIFICATIONS

### Haematological

#### Gemcitabine

Neutrophils $>1.5 \times 10^9/L$ and platelets $>100 \times 10^9/L$	give 100% dose
Neutrophils $<1.5 \times 10^9/L$ or platelets $<100 \times 10^9/L$	delay treatment (day 1) or omit bladder treatment (day 8), gynae see investigations above (day 8)

### Non-haematological

#### Gemcitabine

Diarrhoea and/or mucositis grade 2	omit until toxicity resolved then restart at 100% dose
Diarrhoea and/or mucositis grade 3	omit until toxicity resolved then restart at 75% dose
Diarrhoea and/or mucositis grade 4	omit until toxicity resolved then restart at 50% dose

### Hepatic impairment

#### Gemcitabine

Bilirubin $>27 \mu\text{mol/L}$	initiate treatment with 80% dose
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### Renal impairment

#### Carboplatin

GFR / calculated CrCl $\leq 20 \text{ml/min}$ or $\leq 30 \text{ml/min}$ with pre-existing severe renal impairment	contraindicated
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## REFERENCES