RALTITREXED (Tomudex)

INDICATION (ICD10) C18, C20

1. Relapsed colorectal cancer, patients contraindicated to capecitabine / fluorouracil treatment due to cardiac toxicity (ie cardiac arrhythmias or appropriately designed studies. or consider in DPYD deficiency
2. Consider for colorectal adjuvant use if absolute contraindication to capecitabine or fluorouracil.

PS 0, 1, 2

REGIMEN

Day 1	**RALTITREXED**	3mg/m^2	IV infusion	#ml sodium chloride 0.9% over 15 minutes

diluent and diluent volume for dose prescribed as per national standardised product specification

CYCLE FREQUENCY AND NUMBER OF CYCLES

Every 21 days for 3-6 cycles

ANTI-EMETICS

Moderately emetogenic day 1

CONCURRENT MEDICATION REQUIRED

Raltitrexed	-

EXTRAVASATION AND TYPE OF LINE / FILTERS

Raltitrexed – inflammitant

Peripheral line

INVESTIGATIONS

Blood results required before SACT administration

FBC, U&E and LFTs Neutrophils ≥2.0x10^9/L Platelets ≥100x10^9/L	baseline and every cycle
Serum creatinine (and calculated CrCl)	baseline and every cycle
DPYD (dihydropyrimidine dehydrogenase) test	baseline
ECG (possible ECHO) if patient has preexisting cardiac disease	baseline
Weight	baseline and every cycle

MAIN TOXICITES AND ADVERSE REACTIONS

Raltitrexed	Diarrhoea Stomatitis

INTERACTIONS WHICH MAY REQUIRE DOSE MODIFICATIONS (not exhaustive list check SPC/BNF/Stockleys)

Raltitrexed	Vaccines may increase risk of generalised infection.

DOSE MODIFICATIONS

Haematological

Raltitrexed

Grade 3 haematological toxicity (neutrophils 0.5-1.0x10^9/L or platelets 25-50x10^9/L)	Give 75% dose
Grade 4 haematological toxicity (neutrophils <0.5x10^9/L or platelets <25x10^9/L)	Give 50% dose
Grade 4 haematological toxicity (neutrophils <0.5x10^9/L or platelets <25x10^9/L) with grade 3 diarrhoea or mucositis	Discontinue

Non-haematological

Raltitrexed

Grade 2 gastrointestinal toxicity (diarrhoea or mucositis)	Give 75% dose
Grade 3 gastrointestinal toxicity (diarrhoea or mucositis)	Give 50% dose
Grade 3 gastrointestinal toxicity (diarrhoea or mucositis) with grade 4 haematological toxicity (neutrophils <0.5x10^9/L or platelets <25x10^9/L)	Discontinue

Hepatic impairment

Raltitrexed

Mild and moderate	no dose adjustment
Severe	not recommended

Renal impairment

Raltitrexed

CrCl >65ml/min	give 100% dose 3 weekly
CrCl 55-65ml/min	give 75% dose 4 weekly
CrCl 25-54ml/min	give 50% dose 4 weekly
CrCl <25ml/min	contraindicated

REFERENCES

1. SPC

Assessments

	Pre	Cycle 1	Cycle 2	Cycle 3	Cycle 4	Ongoing	Last cycle
Informed consent	x					Verbal with each cycle	
Clinical assessment	x		x		x	Every 3 months and as clinically indicated	x
SACT assessment (PS and toxicities)	x	x	x	x	x	Every cycle	Check has OPD appointment
FBC	x	x	x	x	x	Every cycle	x
U&E & LFTs & LDH	x	x	x	x	x	Every cycle	x
CT scan	x					Every 3 months	
Weight recorded	x	x	x	x	x	Every cycle	x