

## RALTITREXED (Tomudex) OXALIPLATIN

### INDICATION (ICD10) C18, C20

1. Metastatic and relapsed colorectal cancer, patients contraindicated to capecitabine / fluorouracil treatment due to cardiac toxicity (ie cardiac arrhythmias) or consider in DPYD deficiency (unlicensed).
2. Consider for colorectal adjuvant use if absolute contraindication to capecitabine or fluorouracil (unlicensed).

PS 0, 1, 2

### REGIMEN

Day 1	<b>OXALIPLATIN</b>	130mg/m <sup>2</sup>	IV infusion	#ml glucose 5% over 2 hours
	<b>RALTITREXED</b>	3mg/m <sup>2</sup>	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 6 cycles (review after 3 cycles)

### ANTI-EMETICS

Moderately emetogenic day 1

### CONCURRENT MEDICATION REQUIRED

Oxaliplatin	Flush with glucose 5% before and after infusion
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### EXTRAVASATION AND TYPE OF LINE / FILTERS

Oxaliplatin – exfoliant

Raltitrexed – inflammitant

Central or peripheral line

### INVESTIGATIONS

Blood results required before SACT administration

FBC, U&E and LFTs Neutrophils $\geq 2.0 \times 10^9/L$ Platelets $\geq 100 \times 10^9/L$	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

Oxaliplatin	Peripheral sensory neuropathy and laryngeal spasm – avoid cold drinks and touching cold items
Raltitrexed	Diarrhoea Stomatitis

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

Oxaliplatin	Vaccines may increase risk of generalised infection.
Raltitrexed	Vaccines may increase risk of generalised infection.

## DOSE MODIFICATIONS

### Haematological

#### Raltitrexed

Grade 3 haematological toxicity (neutrophils $0.5-1.0 \times 10^9/L$ or platelets $25-50 \times 10^9/L$ )	Give 75% dose
Grade 4 haematological toxicity (neutrophils $<0.5 \times 10^9/L$ or platelets $<25 \times 10^9/L$ )	Give 50% dose
Grade 4 haematological toxicity (neutrophils $<0.5 \times 10^9/L$ or platelets $<25 \times 10^9/L$ ) with grade 3 diarrhoea or mucositis	Discontinue

### Non-haematological

#### Oxaliplatin

If patients develop acute laryngopharyngeal dysaesthesia infuse the next cycle over 4 hours.

If symptoms persist give 80% dose.

If persistent sensory symptoms occur, withdraw treatment

#### 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 $<0.5 \times 10^9/L$ or platelets $<25 \times 10^9/L$ )	Discontinue

### Hepatic impairment

#### Oxaliplatin

No dose adjustment is needed.

#### Raltitrexed

Mild and moderate	no dose adjustment
Severe	not recommended

### Renal impairment

#### Oxaliplatin

CrCl $>30 \text{ml/min}$	give 100% dose
CrCl $<30 \text{ml/min}$	dose reduce (consider 50% of original dose)

#### Raltitrexed

CrCl $>65 \text{ml/min}$	give 100% dose 3 weekly
CrCl 55-65ml/min	give 75% dose 4 weekly
CrCl 25-54ml/min	give 50% dose 4 weekly
CrCl $<25 \text{ml/min}$	no therapy

## REFERENCES

1. Scheithauer W, Kornek GV et al, Oxaliplatin plus raltitrexed in patients with advanced colorectal carcinoma: results of a Phase I-II trial, Cancer. 2001 Apr 1;91(7):1264-71.
2. Seitz JF, Bennouna J et al, Multicenter non-randomized phase II study of raltitrexed (Tomudex) and oxaliplatin in non-pretreated metastatic colorectal cancer patients. Ann Oncol. 2002 Jul;13(7):1072-9.

## 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