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| Indication | Breast Cancer |
| Treatment Intent | Adjuvant Neo Adjuvant |
| Frequency and number of cycles | EC every 21 days for 4 cycles followed by paclitaxel every 14 days for 4 cycles. |
| Monitoring Parameters pre-treatment | <ul style="list-style-type: none"> • Consider using actual BSA • ECG should be checked prior to cycle 1 and undertake ECHO/MUGA as clinically indicated • Monitor FBC, LFT and U&E at each cycle. • If neuts <1 or PLT <100 d/w consultant. • Impaired renal and liver function – d/w consultant. • Patients developing hypersensitivity reactions to Paclitaxel may be rechallenged with full dose Paclitaxel following prophylactic medication (famotidine 40mg po given 4 hours prior to treatment plus Hydrocortisone 100mg iv and chlorphenamine 10mg iv 30 minutes prior to treatment), then give paclitaxel over 3-6 hours (i.e. starting at over 6 hours and gradually increase rate if possible). • Dose reduce Paclitaxel by 20% in the event of \geq grade 2 neuropathy and consider a delay until recovery to \leq grade 1. • Consider omitting paclitaxel in event of recurrent \geq grade 3 neuropathy or recurrent OR persistent \geq grade 2 neuropathy following a dose reduction. • Dose reduction should be considered if any other grade 3 or 4 non-haematological toxicity or repeat appearance of grade 2 (except N&V and alopecia). Delay until resolution of toxicity to \leq grade 1. • Common drug interactions: (for comprehensive list refer to BNF/SPC) Avoid concomitant use of paclitaxel with CYP2C8 or CYP3A4 inducers (e.g. rifampicin, carbamazepine, phenytoin) and inhibitors (e.g. ketoconazole erythromycin, fluoxetine, gemfibrozil, clopidogrel, cimetidine, ritonavir, nelfinavir). Caution, ciclosporin increases concentration of epirubicin. |
| References | KMCC proforma BRE-050 v1 SPC accessed online 27/02/2020 ARIA 07/01/20 BNF accessed online 27/02/20 Changes made to v1.4 in line with 'SOP for removal of ranitidine on KMCC protocols and on aria regimens |

NB For funding information, refer to CDF and NICE Drugs Funding List

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| Protocol No | BRE-050 | Kent and Medway SACT Protocol Disclaimer: No responsibility will be accepted for the accuracy of this information when used elsewhere. | |
| Version | V2 | Written by | M.Archer |
| Supersedes version | V1 | Checked by | C.Waters S.Patel |
| Date | 21.09.21 | Authorising consultant (usually NOG Chair) | J.Hall |

Cycle 1 – 4 Repeat every 21 days:

| Day | Drug | Dose | Route | Infusion Duration | Administration |
|-------|-------------------------|--|-------|---|--|
| Day 1 | Dexamethasone | 8mg | PO | | |
| | Ondansetron | <75yrs 16mg ≥75yrs 8mg | IV | 15 min | In 50ml Sodium chloride 0.9% |
| | EPIRUBICIN | 90mg/m² | IV | slow bolus | Through the side of a fast running Sodium Chloride 0.9% intravenous infusion |
| | CYCLOPHOSPHAMIDE | 600mg/m² | IV | slow bolus | Through the side of a fast running Sodium Chloride 0.9% intravenous infusion |
| TTO | Drug | Dose | Route | Directions | |
| | Dexamethasone | 6mg | PO | OM for 3 days. Take with or just after food, or a meal. | |
| | Metoclopramide | 10mg | PO | 10mg three times a day for 3 days, then 10mg up to 3 times a day as required. Do not take for more than 5 days continuously. | |
| | Ondansetron | 8mg | PO | BD for 3 days | |
| | Filgrastim | 300 mcg or consider dose of 480 mcg if patient > 80kg | SC | OD starting on day 5 for 5 days | |

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Cycle 5-8 repeat every 14 days:

| Day | Drug | Dose | Route | Infusion Duration | Administration |
|------------|---|---|-------|--|---|
| Day 1 | Dexamethasone | 12mg | IV | Bolus | |
| | Chlorphenamine | 10mg | IV | Bolus | Over 3 min through a fast running Sodium chloride 0.9% intravenous infusion. |
| | Metoclopramide | 20mg | IV | Bolus | |
| | Please ensure pre-meds are given 30 mins prior to paclitaxel | | | | |
| | PACLITAXEL | 175mg/m² | IV | 3 hours | In 500ml Sodium Chloride 0.9% (non-PVC bag via a non PVC giving set) via in-line 0.22 micron filter (if dose <150mg in 250ml Sodium chloride 0.9%). Flush with sodium chloride 0.9%. |
| TTO | | | | | |
| | Dexamethasone | 6mg | PO | OM for 3 days | Take with or just after food, or a meal. |
| | Metoclopramide | 10mg | PO | 10mg up to 3 times a day as required (max. 30mg per day including 20mg pre-chemo dose) | Do not take for more than 5 days continuously. |
| | Filgrastim | 300 mcg or consider dose of 480 mcg if patient > 80kg | SC | OD starting on day 3 for 5 days | |

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