Indication	Head and Neck - Malignant salivary gland tumours
Treatment Intent	Palliative
Frequency and number of cycles	Every 21 days for 6 cycles
Monitoring Parameters pre-treatment	• ECG must be checked prior to cycle 1. • C+G should be used to measure CrCl prior to cycle 1 • If CrCl <60ml/min then obtain EDTA result • If CrCl 30-59ml/min consider dose reduction of cisplatin or consider carboplatin. • If CrCl <30ml/min stop platinum. • If CrCl < 50 ml/min dose reduce capecitabine (see SPC) • Monitor LFT's and serum creatinine at each cycle. • If neuts 1.0-1.4 and PLT ≥100 d/w consultant. If neuts <1.0 or Plts <100 delay one week • Dose reduction should be considered if grade 3 or 4 non-haematological toxicity or repeat appearance of grade 2 (except N&V and alopecia). Delay until resolution of toxicity to ≤ grade 1 • Consider audiology test for hearing impaired patients and monitor all patients for ototoxicity throughout treatment. • **DPD testing:** DPD testing must be undertaken in all patients before starting treatment; the result must be checked before treatment is started. • **Cardio toxicity:** Caution in patients with prior history of coronary heart disease, arrhythmias and angina pectoris. • Maximum recommended cumulative dose epirubicin 900mg/m2. • **Skin reactions:** Capecitabine can induce severe skin reactions such as Stevens-Johnson syndrome and Toxic Epidermal Necrolysis. Patients should be informed of the possibility of such reactions and informed to seek urgent medical advice should any symptoms of a severe skin reaction occur. Treatment should be permanently discontinued in affected patients. • **Drug interactions (for comprehensive list refer to BNF/SPC):** ○ **Capecitabine:** must not be given with concurrent sorivudine or derivatives (e.g brivudine), see SPC. Monitor PT and INR regularly in patients taking coumarin-derivative anticoagulants. Monitor phenytoin levels with concomitant use. Caution with folinic acid or folic acid – potential for increased toxicity. Avoid concomitant allopurinol. ○ Caution, ciclosporin increases concentration of epirubicin. ○ In patients receiving cisplatin and phenytoin, the serum level of phenytoin might be reduced, monitor phenytoin levels with concomitant use. • **Skin reactions:** Capecitabine can induce severe skin reactions such as Stevens-Johnson syndrome and Toxic Epidermal Necrolysis. Patients should be informed of the possibility of such reactions and informed to seek urgent medical advice should any symptoms of a severe skin reaction occur. Treatment should be permanently discontinued in affected patients. • Capecitabine may cause dizziness, fatigue and nausea. Patients should be aware this may affect their ability to drive or operate machinery. • For oral self-administration: refer to local Trust policy on oral anti-cancer medicines and supply Patient Information Leaflet.
References	KMCC SACT protocol MULTI-010 v1 SPCs for epirubicin and capecitabine accessed online 17.06.21

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

Repeat every 21 days

Day	Drug	Dose	Route	Infusion Duration	Administration
1	Sodium Chloride 0.9%	1000ml	IV	2hours	+ 20mmol KCL + 10mmol Mg^{2+}
	Mannitol 10%	200ml	IV	15min	
	Ondansetron	<75yrs 16mg ≥75yrs 8mg	IV	15min	Sodium Chloride 0.9% 50ml
	Dexamethasone	8mg	PO		
	EPIRUBICIN	**50mg/m²**	IV	3 min	through the side of a fast running Sodium chloride 0.9% intravenous infusion
	CISPLATIN	**60mg/m²**	IV	2 hours	In Sodium Chloride 0.9% 1000ml
	Furosemide	40mg	IV/PO		If urine output <100ml/hr or weight gain >1kg
	Sodium Chloride 0.9%	1000ml	IV	2 hours	+ 20mmol KCL + 10mmol Mg^{2+}
	Sodium Chloride 0.9%	500ml	IV	1 hour	Or 500ml water, orally
	*(Furosemide)	40mg	IV/PO	***only if required**	If patient remains in a 2L positive balance
TTO	Drug	Dose	Route		Directions
	CAPECITABINE	**1250mg/m²/day** In 2 divided doses	PO		**For 21 days continuously.** Take within 30 mins after food and approximately every 12 hours. Available as 500mg & 150mg.
	Metoclopramide	10mg	PO		3 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.
	Dexamethasone	6mg	PO		OM for 3 days