Systemic Anti Cancer Treatment Protocol

Docetaxel Gastric

PROTOCOL REF: MPHAUGIDOC (Version No: 1.0)

Approved for use in:

Second line treatment of locally advanced and metastatic gastric / gastro-oesophageal junction adenocarcinoma PS 0-1

Dosage:

Drug	Dosage	Route	Frequency
Dexamethasone	8mg BD	PO	Three days starting 24 hours before docetaxel
Docetaxel	75mg/m ²	IV	Every 21 days

Supportive treatments:

Domperidone 10mg oral tablets, up to 3 times a day or as required

Extravasation risk:

Vesicant - refer to trust / network extravasation policy - specific treatment may apply

Administration:

Day	Drug	Dosage	Route	Diluent and Rate
1	Dexamethasone	8mg BD	PO	For 3 days starting 24 hours before docetaxel
1	Docetaxel	75mg/m ²	IV	Sodium chloride 0.9% 250mL over 60 minutes

Repeat every 21 days for 6 cycles

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Notes:

Be aware of hypersensitivity and infusion related reactions – see below Ensure oral pre-med dexamethasone has been taken before giving docetaxel If dexamethasone pre-meds have **not** been taken then additional **dexamethasone IV 8mg** may be administered prior to starting the docetaxel infusion

Main Toxicities:

Myelosuppression, hypersensitivity and infusion related, cutaneous reactions and nail changes, fluid retention, alopecia, peripheral neurotoxicity, stomatitis, diarrhoea, ovarian failure/infertility

	Pre	Cycle 1	Cycle 2	Cycle 3	Cycle 4	Cycle 5	Cycle 6	Comments
Medical Assessment	Х		Х		Х		Х	Alternate cycles
Nursing Assessment	Х	Х	Х	Х	Х	Х	Х	Every cycle
FBC	х	Х	Х	Х	Х	Х	Х	Every cycle
U&E & LFT	Х	Х	Х	Х	Х	Х	Х	Every cycle
CT scan	Х			Х				As clinically indicated
Informed Consent	Х							
Blood pressure measurement	х							Repeat if clinically indicated
PS recorded	Х	Х	Х	Х	Х	Х	Х	Every cycle
Toxicities documented	Х	Х	Х	Х	Х	Х	Х	Every cycle
Weight recorded	Х	Х	Х	Х	Х	Х	Х	Every cycle

Investigations and treatment plan

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Dose Modifications and Toxicity Management:

Haematological toxicity

Proceed on day 1 if:-

ANC ≥ 1.5 x 10 ⁹ /L	Platelets ≥ 100 x 10 ⁹ /L
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Delay 1 week on day 1 if:-

ANC ≤ 1.4 x 10 ⁹ /L	Platelets ≤ 99 x 10 ⁹ /L
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If greater than 7 days required for FBC recovery then dose reduce to 60mg/m²

Non-haematological toxicity

Renal	No dose adjustments needed
Hepatic	If bilirubin > 22mmol/l or ALT/AST > 3.5 x ULN and ALP > 6 x ULN not recommended – delay treatment and refer to consultant
Cutaneous	Grade 1 persistent or Grade 2 – delay treatment until resolved to grade 0-1. Restart at same dose Grade 3 restart once recovered at 60mg/m ²
Neuropathy	Grade 2 – delay treatment until resolved to grade 1. Reduce dose to 60mg/m ² Grade 3 or 4 – stop docetaxel permanently
Other grade 3/4 reactions	Discontinue treatment

References:

Cougar-O2 trial; Lancet Oncology 2014 15(1) 78-86

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