

# **Chemotherapy protocol**

#### **Drug regimen**

**Docetaxel** 

#### Indications for use

Metastatic breast cancer

In anthracycline resistant / refractory disease defined as:

- Relapse during / or within 12 months of adjuvant treatment with anthracyclines
- During or following treatment for metastatic disease

#### **Regimen**

N.B. Pre-medicate with 8mg Dexamethasone bd po for 3 days starting 24 hours pre-treatment.

DRUG	FLUID	ROUTE	TIME
Docetaxel 100 mg/m <sup>2</sup>	250mls N/saline	IV	1 hr

Regimen to be given every 3 weeks for 6 cycles

#### **Investigation prior to initiating treatment**

U&Es, FBC, LFT, Weight

#### **Cautions**

Levels (see below)

# Investigations and consultations prior to each cycle

**FBC** 

Consultation - Each cycle

U&Es and LFTs

The liver function test may be retrospectively looked at (i.e. after the chemotherapy treatment) <u>unless</u> they are known to be abnormal then they need to be repeated the day before so that the results are available prechemotherapy.

#### Acceptable levels for treatment to proceed

(if outside these levels defer one week or contact consultant)

Neutrophils >1.5 Platelets >100 Bilirubin within normal limits AST/ALT < 2.5 X ULN

If Neutrophils 1.2 – 1.5 contact consultant

#### **Side Effects**

Hair loss, prolonged neutropenia, allergic reactions, diarrhoea, neuropathy

# **Dose Modification Criteria**

Consider 25% dose reduction:

- Febrile neutropenia
- Severe / prolonged neutropenia
- Grade 3 diarrhoea
- Grade 2 neuropathy
- Rising ALT / AST

# Discontinue treatment:

- Life threatening sepsis
- Grade 4 toxicity

# **Specific Information on Administration**

Patients must be prescribed a pre-medication of dexamethasone 8 mg bd po to be started 24 hours before treatment and continued for a total of 72 hours. This is to reduce the incidence of allergic reaction.

# THIS PROTOCOL HAS BEEN DIRECTED BY $\underline{\mathsf{DR}}\ \mathsf{HOGG}, \mathsf{DESIGNATED}\ \mathsf{LEAD}\ \mathsf{CLINICIAN}\ \mathsf{FOR}\ \mathsf{BREAST}\ \mathsf{CANCER}$

#### RESPONSIBILITY FOR THIS PROTOCOL LIES WITH THE HEAD OF SERVICE

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