NHS
North West Coast
Strategic Clinical Networks

Chemotherapy Protocol

DRUG REGIMEN
Oral Etoposide

Indication for use
Relapsed ovarian cancer

Regimen

A] Oral etoposide 40mg/m2 for 21 days (repeat every 28 days)

Or

B] Oral etoposide 50 mg od for 14 days (repeat every 21 days).

For usually no more than 6 cycles

Choice of dosage regime is dependent on comorbidities, prior treatment, baseline FBC, U+E, LFTS, age >70 or any prior neutropenia

For regimen A - Often the dose is calculated around 75 mg per day. To achieve that dose use an alternating dose of 50/100mg daily.

Investigation prior to initiating treatment
FBC
U&Es
LFTs
CT scan as baseline to assess response

Cautions
Renal impairment
Hepatic impairment

Investigations and consultations prior to each cycle
FBC, U+E, LFTS, Calcium, Phosphate, CA125 pre each cycle
For cycle 1 - weekly FBC and U+Es; consider dose reductions if nadir neutrophils <1, nadir Platelets <75, or neutropenic fever.
CT scan every 3-4 cycles
Medical / Chemo CNS review pre each cycle

Acceptable levels for treatment to proceed (if outside these levels defer one week or contact consultant)
Neutrophils ≥ 1.5, Platelets ≥ 100, Hb >90
If neutrophils 1.0 – 1.5 contact **consultant**
Delay if Neutrophils <1.0 OR platelets < 100

Side Effects
They include: Myelosuppresion, alopecia, nausea, gastritis, abdominal pain, stomatitis

Dose Modification Criteria

Haematological Toxicity:
No dose modification for CTC grade I/II ANC
Grade III/IV ANC - delay chemotherapy until recovered. On recovery give 20% to 25% dose reduction.

Renal Function
No dose reduction needed for mild renal failure. Avoid in moderate to severe renal failure, e.g. CrCl < 20ml/min)

Hepatic Function:
If pre-treatment LFT are abnormal or if bilirubin raised, proceed with caution and discuss etoposide dosage with an Oncology specialist.

Suggested dose modifications	
Serum bilirubin (µmol/L)	**Dose**
< 25	**100 %**
25 to 50	**50 %**
> 50	**Do not administer**

Impaired hepatic function may be a risk factor for increased toxicities.

Specific Information on Administration

- Available as 50 mg and 100mg capsules.
- Capsules to be swallowed whole on an empty stomach half an hour before or 2 hours after a meal.
- If vomiting occurs after the dose is taken, a replacement dose must NOT be administered.

THIS PROTOCOL HAS BEEN DIRECTED BY DR YIANNAKIS, DESIGNATED LEAD CLINICIAN FOR GYNAECOLOGICAL CANCER

RESPONSIBILITY FOR THIS PROTOCOL LIES WITH THE HEAD OF SERVICE.

DATE **December 2017**
REVIEW **December 2019**
VERSION **1**