NHS
North West Coast
Strategic Clinical Networks

Chemotherapy protocol

DRUG REGIMEN
Cisplatin and gemcitabine based on ABC02 trial

Indication for use
Biliary tract cancer

Regimen

Day	Drug	Route	Fluid	Time
1,8		IV	1 litre 0.9% sodium chloride + 20mmol potassium chloride + 10mmol magnesium sulphate	1 hour
	Cisplatin 25mg/m^2	IV	500ml 0.9% sodium chloride	1 hour
	Gemcitabine 1000mg/m^2	IV	250ml 0.9% sodium chloride	30 minutes

Given on days 1 & 8 every 3 weeks for 8 cycles

Investigation prior to initiating treatment
FBC, U&Es, LFTs

Cautions
Patients must have adequate renal and hepatic function

Investigations and consultations prior to each treatment (i.e. days 1 & 8)
FBC
U&Es
LFTs

Acceptable levels for treatment to proceed (if outside these levels defer one week or contact consultant)
Day 1:
Neutrophils ≥ 1
Platelets ≥ 100
Creatinine clearance ≥ 50
Bilirubin ≤ 1.5x ULN
ALT +/- Alk Phos < 5x ULN

Day 8:

Neutrophils		Platelets	Gemcitabine dose	Cisplatin dose
≥ 1	And	>100	100%	100%
0.5 – 1	Or	50 – 100	75%	100%
< 0.5	Or	<50	Omit	Omit

Side Effects
Nausea, myelosuppression, asthenia, alopecia

Dose Modification Criteria
Omit cisplatin if $Cl_{Cr} < 50$
Consider 25% dose reduction of gemcitabine if treatment delayed

Specific Information on Administration
Gemcitabine must be given over 30 minutes. Longer infusion times lead to increased toxicity

THIS PROTOCOL HAS BEEN DIRECTED BY DR MITCHELL, DESIGNATED LEAD CLINICIAN FOR UPPER GI CANCER

RESPONSIBILITY FOR THIS PROTOCOL LIES WITH THE HEAD OF SERVICE

DATE	**June 2017**
REVIEW	**June 2019**
VERSION	**6**