

North West Coast Strategic Clinical Networks

Chemotherapy protocol

Drug regimen Concurrent Gemcitabine

Indication for use

Concurrent chemo/radiotherapy bladder

<u>Regimen</u>

| Day | Drug | Route | Fluid | Time |
|-----|----------------------------------|-------|-----------------|---|
| 1 | Gemcitabine 100mg/m ² | IV | 250ml 0.9% NaCl | 2 – 4 hours pre XRT, 30 min infusion |
| 8 | Gemcitabine 100mg/m ² | IV | 250ml 0.9% NaCl | 2 – 4 hours pre XRT, 30 min infusion |
| 15 | Gemcitabine 100mg/m ² | IV | 250ml 0.9% NaCl | 2 – 4 hours pre XRT, 30 min infusion |
| 22 | Gemcitabine 100mg/m ² | IV | 250ml 0.9% NaCl | 2 – 4 hours pre XRT, 30 min infusion |

Investigation prior to initiating treatment

FBC, U&Es, LFTs,

Investigations and consultations prior to each cycle

Day 1, Day 8, Day 15, Day 22 - FBC, U&Es, LFTs,

Acceptable levels for treatment to proceed

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

Day 1, Day 8, Day 15, Day 22: WCC >3.0, neutrophils >1.5, platelets >100

Side Effects

Nausea & vomiting, bone marrow suppression, neutropenia, thrombocytopenia, peripheral neuropathy, nephrotoxicity, audio-toxicity, pulmonary-toxicity (Pneumonitis) (altered LFT's from gemcitabine), flu-like symptoms, allergic rash

Dose Modification Criteria

None specific

Specific Information on Administration

Do not reduce rate of administration of gemcitabine.

THIS PROTOCOL HAS BEEN DIRECTED BY DR BIRTLE DESIGNATED LEAD CLINICIAN FOR UROLOGICAL CANCER RESPONSIBILITY FOR THIS PROTOCOL LIES WITH THE HEAD OF SERVICE

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