

Regimen Reference Order – GYNE – PEB

ARIA: GYNE – [PEB]

Planned Course: Every 21 days for 3 to 4 cycles
 Indication for Use: Germ Cell Tumor of Ovary; Curative

CVAD: At Provider’s Discretion

<p><u>Proceed with treatment if:</u></p> <p><u>Cycle 1</u></p> <p><u>Day 1</u></p> <ul style="list-style-type: none"> • Proceed regardless of ANC and platelet value • Creatinine clearance greater than 45 mL/minute <p><u>Days 9 and 16</u></p> <ul style="list-style-type: none"> • Blood work not required to proceed with treatment <p><u>Cycle 2 and onwards</u></p> <p><u>Day 1</u></p> <ul style="list-style-type: none"> • ANC equal to or greater than $1 \times 10^9/L$ AND Platelets equal to or greater than $75 \times 10^9/L$ • Creatinine clearance greater than 45 mL/minute <p><u>Days 9 and 16</u></p> <ul style="list-style-type: none"> • Blood work not required to proceed with treatment ❖ Contact Gyne-Oncologist if parameters not met. Do not delay or cancel therapy without consulting Gyne-Oncologist on call

SEQUENCE OF MEDICATION ADMINISTRATION

Pre-treatment Requirements		
Drug	Dose	CCMB Administration Guideline
Not Applicable		

Treatment Regimen – GYNE – PEB		
Establish primary solution 500 mL of: normal saline		
Drug	Dose	CCMB Administration Guideline
Day 1		
aprepitant	125 mg	Orally 1 hour pre-chemotherapy
ondansetron	16 mg	Orally 30 minutes pre-chemotherapy
dexamethasone	12 mg	Orally 30 minutes pre-chemotherapy
OLANzapine	2.5 mg	Orally 30 minutes pre-chemotherapy

CISplatin	20 mg/m ²	IV in normal saline 250 mL over 1 hour
etoposide	100 mg/m ²	IV in normal saline 500 mL over 1 hour <i>Use non-DEHP bags and non-DEHP administration sets</i> <i>Concentration dependent drug: Pharmacy will adjust diluent volume to ensure drug stability</i>
Day 2		
aprepitant	80 mg	Orally 1 hour pre-chemotherapy
ondansetron	16 mg	Orally 30 minutes pre-chemotherapy
dexamethasone	12 mg	Orally 30 minutes pre-chemotherapy
OLANzapine	2.5 mg	Orally 30 minutes pre-chemotherapy
CISplatin	20 mg/m ²	IV in normal saline 250 mL over 1 hour
etoposide	100 mg/m ²	IV in normal saline 500 mL over 1 hour <i>Use non-DEHP bags and non-DEHP administration sets</i> <i>Concentration dependent drug: Pharmacy will adjust diluent volume to ensure drug stability</i>
hydrocortisone	100 mg	IV in normal saline 50 mL over 15 minutes ONLY to be given if patient experienced fever and/or chills with any previous administration of bleomycin
bleomycin	30 units	IV in normal saline 50 mL over 10 minutes
Days 3, 4 and 5		
aprepitant	80 mg	Orally 1 hour pre-chemotherapy
ondansetron	16 mg	Orally 30 minutes pre-chemotherapy
dexamethasone	12 mg	Orally 30 minutes pre-chemotherapy
OLANzapine	2.5 mg	Orally 30 minutes pre-chemotherapy
CISplatin	20 mg/m ²	IV in normal saline 250 mL over 1 hour
etoposide	100 mg/m ²	IV in normal saline 500 mL over 1 hour <i>Use non-DEHP bags and non-DEHP administration sets</i> <i>Concentration dependent drug: Pharmacy will adjust diluent volume to ensure drug stability</i>
Days 9 and 16		
hydrocortisone	100 mg	IV in normal saline 50 mL over 15 minutes
bleomycin	30 units	IV in normal saline 50 mL over 10 minutes

In the event of an infusion-related hypersensitivity reaction, refer to the 'Hypersensitivity Reaction Standing Order'

REQUIRED MONITORING

All Cycles

Day 1

- CBC, serum creatinine, urea, liver enzymes and electrolytes as per Physician Orders

Days 9 and 16

- No blood work required

Pulmonary Function Tests (PFTs)

- Pulmonary function monitoring as clinically indicated as per Physician Orders

Recommended Support Medications

Drug	Dose	CCMB Administration Guideline
aprepitant	80 mg	Orally once daily on Days 6 and 7
dexamethasone	8 mg	Orally once daily on Days 6 and 7
OLANzapine	2.5 mg	Orally the evening of Days 1, 2, 3, 4 and 5 then twice daily on Days 6 to 7. Also use OLANzapine 2.5 to 5 mg AS NEEDED for breakthrough nausea and vomiting (including Days 1 to 7) up to a maximum of 10 mg per day. Contact clinic if nausea/vomiting is not adequately controlled

DISCHARGE INSTRUCTIONS

- Patients should be instructed to contact their cancer team immediately if symptoms of hypersensitivity reactions occur after discharge
- Instruct patient to continue taking anti-emetic(s) at home
- Maintain oral intake of 2000 mL (8 glasses) of fluid daily at home
- Reinforce applicable safe handling precautions of medications, blood and body fluids for 48 hours after completion of chemotherapy

ADDITIONAL INFORMATION

- CISplatin is ototoxic and nephrotoxic
- CISplatin can cause hypomagnesemia
- bleomycin is associated with pulmonary toxicity
- hydrocortisone is given as needed on Day 2 of this regimen and must be given on Days 9 and 16