

Regimen Reference Order: BRST – PERTuzumab + trastuzumab + DOCetaxel

ARIA: BRST – [PERTuzumab + trastuzumab + DOCetaxel]

BRST – [PERTuzumab + trastuzumab – Phase 2]

Planned Course: Every 21 days for 6 to 8 cycles for PERTuzumab + trastuzumab + DOCetaxel
(*greater than 6 cycles at the discretion of the oncologist*). Followed by:

PERTuzumab + trastuzumab every 21 days until disease progression or unacceptable toxicity

Indication for use: Breast Cancer Metastatic

CVAD: Preferred

Proceed with treatment if:

ANC equal to or greater than $1.5 \times 10^9/L$ AND Platelets equal to or greater than $100 \times 10^9/L$

❖ **Contact Physician if parameters not met**

SEQUENCE OF MEDICATION ADMINISTRATION

Pre-treatment Requirements

Drug	Dose	CCMB Administration Guideline
dexamethasone	8 mg	Orally twice a day the day before treatment and one dose the morning of DOCetaxel treatment (Self-administered at home)

Treatment Regimen: BRST – PERTuzumab + trastuzumab + DOCetaxel

Establish primary solution 500 mL of: normal saline		
Drug	Dose	CCMB Administration Guideline
Cycle 1, Day 1		
PERTuzumab	840 mg Loading Dose	IV in normal saline 250 mL over 60 minutes
Cycle 1, Day 2		
metoclopramide	20 mg	Orally 30 minutes pre-chemotherapy
trastuzumab	8 mg/kg Loading Dose	IV in normal saline 250 mL over 90 minutes
DOCetaxel	75 mg/m^2	IV in normal saline 250 mL over 1 hour For 250 mL bags: Infuse 25 mL over 15 minutes and remainder of bag over 45 minutes For 500 mL bags: Infuse 50 mL over 15 minutes and remainder of bag over 45 minutes <i>Use non-DEHP bags and non-DEHP administration sets</i>

Cycles 2 to 8		
metoclopramide	20 mg	Orally 30 minutes pre-chemotherapy
PERTuzumab	420 mg	IV in normal saline 250 mL over 30 minutes
trastuzumab	6 mg/kg	IV in normal saline 250 mL over 30 minutes
DOCEtaxel	75 mg/m ²	IV in normal saline 250 mL over 1 hour For 250 mL bags: Infuse 25 mL over 15 minutes and remainder of bag over 45 minutes. For 500 mL bags: Infuse 50 mL over 15 minutes and remainder of bag over 45 minutes. <i>Use non-DEHP bags and non-DEHP administration sets</i>
Cycle 8 Onwards		
Both PERTuzumab and trastuzumab are to continue every 3 weeks until disease progression or unacceptable toxicities/side effects.		

Flush after each medication:

- 100 mL over 12 minutes (500 mL/hr)

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

REQUIRED MONITORING

All Cycles

- CBC, biochemistry as per physician order
- Left Ventricular Ejection Fraction (LVEF) monitoring is recommended at baseline and every 4 cycles for the first 2 years then every 4 – 8 cycles thereafter

Cycle 1 Day 1 Only

- Monitor heart rate and blood pressure every 15 minutes
- Observe patient for 1 hour after administration
- Full vital signs (temperature, heart rate, respiration, blood pressure and O₂ saturation) prior to discharge

Cycle 1 Day 2 Only

- Full vital signs at baseline and as clinically indicated
- Monitor heart rate and blood pressure every 15 minutes
- Observe patient for 1 hour after administration of trastuzumab and before administration of next medication
- Observe patient 1 hour after administration of DOCEtaxel
- Full vital signs prior to discharge

Cycles 2 and 3

- Full vital signs at baseline and as clinically indicated
- Observe patient 30 minutes after administration of PERTuzumab
- Observe patient 30 minutes after administration of trastuzumab
- Full vital signs prior to discharge

Cycle 4 and Onwards

- Full vital signs at baseline and as clinically indicated
- Monitor as needed

Recommended Support Medications

Drug	Dose	CCMB Administration Guideline
metoclopramide	10 - 20 mg	Orally every 4 – 6 hours as needed for nausea and vomiting

DISCHARGE INSTRUCTIONS

- Instruct patient to continue taking anti-emetic(s) at home
- Reinforce applicable safe handling precautions of medications, blood and body fluids for 48 hours after completion of chemotherapy

ADDITIONAL INFORMATION

- N/A