

Regimen Reference Order – GAST – CRT then mFOLFOX6 (Rectal)

ARIA: GAST - [CRT then mFOLFOX6]

Planned Course: Concurrent Chemoradiation (CRT) Phase: fluorouracil with radiation (25 fractions of radiation over 5 to 6 weeks), followed by:
Post-Concurrent Chemoradiation (Post-CRT) Phase: mFOLFOX6 every 14 days for 8 cycles

Indication for Use: Rectal Cancer; Concurrent Chemoradiation followed by Chemotherapy

CVAD: Required (Ambulatory Pump)

Proceed with treatment if:

ANC equal to or greater than $1.5 \times 10^9/L$ AND Platelets equal to or greater than $75 \times 10^9/L$

❖ **Contact Physician if parameters are not met**

SEQUENCE OF MEDICATION ADMINISTRATION

Pre-treatment Requirements

| Drug | Dose | CCMB Administration Guideline |
|----------------|------|-------------------------------|
| Not Applicable | | |

Treatment Regimen – GAST – CRT then mFOLFOX6 (Rectal)

Concurrent Chemoradiation (CRT) Phase – fluorouracil with radiation

| Drug | Dose | CCMB Administration Guideline |
|--------------|----------------------------|--|
| fluorouracil | 200 mg/m ² /day | IV in D5W continuously by ambulatory infusion device. Start infusion on first day of radiation and continue until last day of radiation (25 fractions of radiation over 5 to 6 weeks) <i>*Alert: Change ambulatory infusion device once every 7 days (i.e. 1400 mg/m² over 168 hours) throughout radiation</i> |

Post-CRT Phase – mFOLFOX6 every 14 days for 8 cycles

Establish primary solution 500 mL of: D5W

| Drug | Dose | CCMB Administration Guideline |
|---------------|----------------------|--|
| ondansetron | 16 mg | Orally 30 minutes pre-chemotherapy |
| dexamethasone | 12 mg | Orally 30 minutes pre-chemotherapy |
| oxaliplatin | 85 mg/m ² | IV in D5W 500 mL over 2 hours <i>*Nursing Alert: oxaliplatin and leucovorin may be infused over the same 2-hour period using a Y-site connector</i> |

| | | |
|---|------------------------|--|
| leucovorin | 400 mg/m ² | IV in D5W 500 mL over 2 hours |
| fluorouracil | 400 mg/m ² | IV Push over 5 minutes |
| fluorouracil | 2400 mg/m ² | IV in D5W continuously over 46 hours by ambulatory infusion device |
| All doses will be automatically rounded that fall within CCMB Approved Dose Bands. See Dose Banding document for more information | | |

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

REQUIRED MONITORING

fluorouracil with radiation (Concurrent Chemoradiation (CRT) Phase)

Prior to start of radiation

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

During radiation

- CBC once weekly as per Physician Orders

mFOLFOX6 (Post-CRT Phase)

All Cycles

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

Recommended Support Medications – GAST – CRT then mFOLFOX6 (Rectal)

Concurrent Chemoradiation (CRT) Phase – fluorouracil with radiation

| Drug | Dose | CCMB Administration Guideline |
|------------------|-------|--|
| prochlorperazine | 10 mg | Orally every 6 hours as needed for nausea and vomiting |

Post-CRT Phase – mFOLFOX6

| | | |
|------------------|-------|--|
| dexamethasone | 8 mg | Orally once daily on Days 2 and 3 |
| prochlorperazine | 10 mg | Orally every 6 hours as needed for nausea and vomiting |

DISCHARGE INSTRUCTIONS

All Treatment Phases

- Ensure patient has received a home chemotherapy spill kit and instruction for use
- 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

fluorouracil with radiation (Concurrent Chemoradiation (CRT) Phase)

- fluorouracil should start on the first day of radiation and continue until the last day of radiation (including weekends and holidays when radiation is not administered)
 - If weekly fluorouracil pump supply will extend beyond the last day of radiation, fluorouracil pump can be disconnected on the last day of radiation
 - If prescribed duration of fluorouracil does not match the radiation schedule (e.g. drug duration will end too soon), contact medical oncologist to discuss whether a prescription to extend drug therapy is appropriate
- In the ARIA regimen **GAST - [CRT then mFOLFOX6]**, fluorouracil for administration with radiation (CRT Phase) is built as **“Cycle #1”**
- Since treatment is given concurrently with radiation, site restrictions are in place

mFOLFOX6 (Post-CRT Phase)

- mFOLFOX6 usually begins within 8 weeks after surgery
- oxaliplatin causes cold intolerance and laryngopharyngeal dysesthesia
 - no ice chips or cold drinks
- oxaliplatin may cause progressive, irreversible neuropathy
 - dose modification may be required
- In the ARIA regimen **GAST - [CRT then mFOLFOX6]**, the first cycle of mFOLFOX6 is built as **“Cycle #2”**. As this regimen is built as a 14-day cycle, the start date of **“Cycle 2”** will require manual adjustment