# **Regimen Reference Order – THOR – CISplatin + irinotecan**

ARIA: LUNG - [CISplatin + irinotecan]

Planned Course:Every 28 days for 6 cyclesIndication for Use:Small Cell Lung Cancer

CVAD: At Provider's Discretion

### Proceed with treatment if:

## Day 1

- ANC equal to or greater than 1.5 x  $10^{9}/L$  AND Platelets equal to or greater than  $100 \times 10^{9}/L$
- Creatinine clearance is greater than 45 mL/minute

Days 8 and 15

- ANC equal to or greater than 1.5 x  $10^{9}$ /L AND Platelets equal to or greater than 100 x  $10^{9}$ /L
  - Contact Physician if parameters not met

# SEQUENCE OF MEDICATION ADMINISTRATION

	Pre-treatment Requirements				
Drug	Dose	CCMB Administration Guideline			
	N	ot Applicable			

т	Treatment Regimen – THOR – CISplatin + irinotecan				
Establish primary solution 500 mL of: normal saline					
Drug	Dose	CCMB Administration Guideline			
Day 1					
magnesium sulfate	2 g	IV in normal saline 1000 mL over 2 hours (Pre hydration)			
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	60 mg/m <sup>2</sup>	IV in normal saline 500 mL over 1 hour *Alert: CISplatin infusion must be complete prior to mannitol administration			
mannitol	12.5 g	IV in normal saline 500 mL over 1 hours (Post hydration)			
atropine	0.6 mg	IV push over 2 to 3 minutes prior to irinotecan May be repeated once if diarrhea occurs during irinotecan infusion			
irinotecan	60 mg/m <sup>2</sup>	IV in D5W 500 mL over 30 minutes			



Days 8 and 15			
ondansetron	16 mg	Orally 30 minutes pre-chemotherapy	
dexamethasone	12 mg	Orally 30 minutes pre-chemotherapy	
atropine	0.6 mg	IV push over 2 to 3 minutes prior to irinotecan May be repeated once if diarrhea occurs during irinotecan infusion	
irinotecan	60 mg/m <sup>2</sup>	IV in D5W 500 mL over 30 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, electrolytes, liver enzymes and total bilirubin as per Physician Orders
- Baseline blood pressure prior to magnesium infusion and repeat 15 minutes after start of magnesium infusion

#### Day 8

CBC as per Physician Orders

Recommended Support Medications				
Drug	Dose	CCMB Administration Guideline		
aprepitant	80 mg	Orally once daily on Days 2 and 3		
dexamethasone	8 mg	Orally once daily on Days 2 to 4 and once daily on Days 9 and 10 and 16 and 17		
OLANZapine	2.5 mg	Orally the evening of Day 1 then twice daily on Days 2, 3 and 4. Also use OLANZapine 2.5 to 5 mg AS NEEDED for breakthrough nausea and vomiting (including Days 1 to 4) up to a maximum of 10 mg per day. Contact clinic if nausea/vomiting is not adequately controlled		
loperamide	2 – 4 mg	Orally as directed below		

# Recommended Support Medications



### DISCHARGE INSTRUCTIONS

- Instruct patient to continue taking anti-emetic(s) at home
- Advise patient that atropine may cause blurred vision and drowsiness
- If diarrhea occurs within 24 hours of irinotecan administration:
  - Return to cancer care clinic or go to the emergency department. A second dose of intravenous atropine may be required
- If cramping or diarrhea occurs more than 24 hours after irinotecan administration:
  - $_{\odot}$  Take loperamide 4 mg (two 2 mg tablets) orally immediately; then
  - $_{\odot}$   $\,$  During the day: take 2 mg (one 2 mg tablet) orally every 2 hours
  - o During the night: Take 4 mg (two 2 mg tablets) orally at bedtime and then every 4 hours until morning
  - STOP loperamide once no bowel movement has occurred (i.e. diarrhea-free) for 12 hours
  - If diarrhea has not stopped despite taking 12 tablets (24 mg) of loperamide over a 24-hour period, please contact your clinic for further instructions. If this occurs after clinic hours, please call the Medical Oncologist on-call and/or report to the nearest emergency room/urgent care centre. Please note that 24 mg per 24 hours is higher than the usual "over the counter" dose for loperamide
- Reinforce applicable safe handling precautions of medications, blood and body fluids for 48 hours after completion of chemotherapy

## **ADDITIONAL INFORMATION**

- Nursing to provide patient with 30 tablet supply of loperamide 2 mg, labelled by Pharmacy, to take at home with Cycle 1
- atropine can cause anticholinergic side effects; including but not limited to tachycardia, bradycardia, urinary retention, changes in vision, dry mouth and drowsiness
- CISplatin is ototoxic and nephrotoxic
- CISplatin can cause hypomagnesemia

