

Regimen Reference Order – BRST – gemcitabine + CISplatin

ARIA: BRST – [gemcitabine + CISplatin]

Planned Course: Every 21 days until disease progression

Indication for Use: Breast Cancer Metastatic or Recurrent

CVAD: At Provider's Discretion

Proceed with treatment if:

- **ANC equal to or greater than $1.5 \times 10^9/L$ AND Platelets equal to or greater than $100 \times 10^9/L$**
- **Creatinine clearance is equal to or greater than 45 mL/minute**
- ❖ **Contact Physician if parameters not met**

SEQUENCE OF MEDICATION ADMINISTRATION

Pre-treatment Requirements

Drug	Dose	CCMB Administration Guideline
Not Applicable		

Treatment Regimen – BRST – gemcitabine + CISplatin

Establish primary solution 500 mL of: normal saline

Drug	Dose	CCMB Administration Guideline
Days 1 and 8		
magnesium sulfate	1 g	IV in normal saline in 500 mL IV over 1 hour (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	30 mg/m ²	IV in normal saline 500 mL over 1 hour
gemcitabine	1000 mg/m ²	IV in normal saline 250 mL over 30 minutes

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

REQUIRED MONITORING

All Cycles

Days 1 and 8

- CBC, serum creatinine, urea, electrolytes, liver enzymes and total bilirubin and as per Physician Orders (serum creatinine required prior to each CISplatin treatment)
- Baseline blood pressure prior to magnesium sulfate infusion and repeat 15 minutes after start of magnesium infusion

Recommended Support Medications

Drug	Dose	CCMB Administration Guideline
aprepitant	80 mg	Orally once daily on Days 2, 3, 9 and 10
dexamethasone	8 mg	Orally once daily on Days 2, 3 and 4 and 9, 10 and 11
OLANzapine	2.5 mg	Orally the evenings of Days 1 and 8 then twice daily on Days 2, 3, 4, 9, 10 and 11. Also use OLANzapine 2.5 to 5 mg AS NEEDED for breakthrough nausea and vomiting (including Days 1 to 4 and Days 8 to 11) up to maximum of 10 mg per day. Contact clinic if nausea/vomiting is not adequately controlled

DISCHARGE INSTRUCTIONS

- 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