

Regimen Reference Order – GAST – FOLFIRINOX (Metastatic)

ARIA: GAST – [FOLFIRINOX (MET)]

Planned Course: Every 14 days until disease progression or unacceptable toxicity

Indication for Use: Pancreatic Cancer Advanced

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 $100 \times 10^9/L$

❖ Contact Physician if parameters not met

SEQUENCE OF MEDICATION ADMINISTRATION

Pre-treatment Requirements

Drug	Dose	CCMB Administration Guideline
Not Applicable		

Treatment Regimen – GAST – FOLFIRINOX (Metastatic)

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 500 mL D5W over 2 hours
atropine	0.6 mg	IV Push over 2 – 3 minutes pre-irinotecan May be repeated once if diarrhea occurs during irinotecan infusion
irinotecan	180 mg/m ²	IV in 500 mL D5W over 90 minutes Irinotecan can be infused at the same time as leucovorin through a Y site
leucovorin	400 mg/m ²	IV in 500 mL D5W over 90 minutes
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 the DSG Approved Dose Bands. See GAST DSG – Dose Banding document for more information

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

REQUIRED MONITORING

All Cycles

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

Recommended Support Medications

Drug	Dose	CCMB Administration Guideline
dexamethasone	8 mg	Orally once daily on Days 2 and 3
prochlorperazine	10 mg	Orally every 6 hours as needed for nausea and vomiting
loperamide	2 – 4 mg	Orally as directed below

DISCHARGE INSTRUCTIONS

- Instruct patient to continue taking anti-emetic(s) at home
- Ensure patient has received a home chemotherapy spill kit and instructions for use
- 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:
 - Take loperamide 4 mg (two 2 mg tablets) orally STAT; then
 - During the day: take 2 mg (one 2 mg tablet) orally every 2 hours
 - 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 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 home with Cycle 1
- oxaliplatin causes cold intolerance and laryngopharyngeal dysesthesia
 - no ice chips or cold drinks
- oxaliplatin may cause progressive, irreversible neuropathy
 - dose modification may be required