TOPOTECAN (IV)

Topotecan is only recommended for the 3nd or subsequent line treatment of women with platinum-sensitive ovarian cancer: NICE guidance April 2016

Drug / Dosage: Topotecan 1.5mg/m^2 IV Day 1 to Day 5 (5 doses in total per cycle)

Administration: in 100 ml of 0.9 % sodium chloride over 30 minutes

Frequency: 3 weekly cycle, until disease progression or unacceptable toxicity

Main Toxicities: myelosuppression; stomatitis; alopecia; diarrhoea

Anti – emetics: mildly emetogenic

Extravasation: non-vesicant

Regular investigations:

FBC	Day 1
U&Es	Day 1
LFTs	Day 1
CA 125	Day 1
EDTA	only required for patients whose C&G is < 50ml/min

Comments: For relevant patients on Cycle 1 whose EDTA is not yet available, the Cockcroft & Gault formula may be used to select the topotecan dose. The topotecan dose should be adjusted if necessary once EDTA available.
EDTA should be repeated if there is a 30% change in serum creatinine.

Dose Modifications

Haematological Toxicity:

Neutrophils < 1.0 x 10^9/l
or
Platelets < 100 x 10^9/l

Delay treatment for 1 week and repeat FBC.
If within normal parameters, proceed at full dose.

The following patients should have dosage reduced to 1.25mg/m^2/day (or subsequently down to 1mg/m^2/day, if necessary):

Patients who experience:

- neutrophils < 0.5 x 10^9/l for 7 days or more **or** severe neutropenia with fever or infection
- have had treatment delayed due to neutropenia
- platelets < 25 x 10^9/l at any point after treatment
- Grade 3 – 4 non haematological toxicity

Renal Impairment:

GFR (ml/min)	Topotecan Dose
≥ 40	Give 100% dose
20 - 39	Give 50% dose
< 20	Nil – contra indicated

Reason for Update: max no of cycles updated; indication updated	Approved by Consultant: Dr A Michael
Version: 5	Approved by Lead Chemotherapy Nurse: P Deery
Supersedes: Version 4	Date: 15.6.16
Prepared by: S Taylor	Checked by: C Tucker

Reference: Creemers, GJ et al JCO 1996; 14: 3056 – 3061

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