

# VINOURELBINE

Second line or later treatment of advanced breast cancer where anthracyclines have failed or are unsuitable  
NICE approved 2002

Drug / Dosage:	Vinorelbine	25mg/m <sup>2</sup>	IV	Day 1 and Day 8
Administration:	Vinorelbine diluted in 50ml 0.9% sodium chloride and infused over 5-10 minutes, running concurrently with 0.9% sodium chloride infusion. Flush the vein afterwards with a further 250ml saline infusion at a free flowing rate.			
Frequency:	3 weekly cycle; Day 1 and Day 8 Objectively assess response after 3 cycles; if responding, continue to a total of 6 cycles. Occasionally, treatment may be continued beyond 6 cycles after Consultant review.			
Main Toxicities:	myelosuppression; peripheral neuropathy and neuropathy-induced constipation; ovarian failure/infertility			
Anti-emetics:	mildly emetogenic			
Extravasation:	vesicant			
Regular Investigations:	FBC	Day 1 and Day 8		
	U&Es & LFTs	Day 1		
	CA 15-3	Cycle 1, 3 and 5 <b>only</b> if elevated prior to treatment		

## Dose Modifications

Haematological Toxicity:	Neutrophils < 1.5 x 10 <sup>9</sup> /l or Platelets < 100 x 10 <sup>9</sup> /l	Check FBC in 1 week and delay dose for up to 2 weeks
Hepatic Impairment:	Vinorelbine clearance is not altered in the presence of moderate liver metastases (i.e. < 75% of liver volume replaced by tumour), and so there is no pharmacokinetic need to reduce the dose. For patients with massive liver metastases, i.e. > 75% of liver volume replaced by tumour, it is empirically suggested that the dose of vinorelbine be reduced by 1/3 and haematological toxicity closely followed up.  If ALT/AST > 5 x ULN and / or bilirubin > 2 x ULN, it is also suggested that the vinorelbine dose be reduced by 33% and haematological toxicity closely followed up.	
Neurological Toxicity:	For Grade 1 – 2 neurological toxicity, continue with 100% dose. For Grade 3 or 4 neurological toxicity, discontinue treatment.	
Reference:	Vogel, C et al; Ann Oncol 1999; 10: 397-402	

Reason for Update: overdue review	Approved by Lead Chemotherapy Nurse: P Deery
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