BC Cancer Protocol Summary for Treatment of Advanced Non-Small Cell Lung Cancer (NSCLC) with Vinorelbine in Elderly Patients

Protocol Code: LUAVVIN

Tumour Group: Lung

Contact Physician: Dr. Christopher Lee

ELIGIBILITY:

- Previously untreated stage IIIB or IV disease
 - May be used as second- or third-line therapy if prior treatment with immunotherapy or targeted agents
- Also:
 - Previously untreated stage IIIA disease not amenable to combined modality therapy
 - Inoperable disease

EXCLUSIONS:

More than one previous chemotherapy regimen

TESTS:

- Baseline: CBC & differential, platelets, creatinine, alkaline phosphatase, ALT, total bilirubin, LDH
 - C-reactive protein and albumin (optional, and results do not have to be available to proceed with first treatment)
- Before each treatment: CBC & differential, platelets
- If clinically indicated: creatinine, bilirubin prior to each cycle

PREMEDICATIONS:

- See anti-emetic guidelines for Rare emetogenic chemotherapy (see protocol SCNAUSEA). Antiemetics are not usually required. Prescribe according to patient specific symptoms.
- Hydrocortisone 100mg IV prior to vinorelbine if patient experiences pain on administration

TREATMENT:

Drug	Dose	BC Cancer Administration Guideline
vinorelbine	30 mg/m ² /day on days 1 and 8	IV in 50 mL NS over 6 minutes

Repeat every 21 days x 6 cycles

DOSE MODIFICATIONS:

1. Hematological:

ANC (x 10 ⁹ /L)		Platelets (x 10 ⁹ /L)	Vinorelbine Dose*
greater than or equal to 1.0	and	greater than or equal to 100	100%
0.5 to less than 1.0	or	75 to less than 100	75%
less than 0.5	or	less than 75	Delay

^{*}Consider decreasing vinorelbine to 75% or 22.5mg/m² if an episode of febrile neutropenia occurs with the prior cycle of treatment

2. Hepatic dysfunction:

Bilirubin (micromol/L)	Vinorelbine Dose
less than or equal to 35	100%
36 to 50	50%
greater than 50	25%

PRECAUTIONS:

- Extravasation: Vinorelbine causes pain and tissue necrosis if extravasated. It
 is recommended to flush thoroughly with 75-125 mL NS after infusing
 vinorelbine. Hydrocortisone 100mg IV prior to vinorelbine may be of benefit.
 Refer to BC Cancer Extravasation Guidelines.
- 2. **Neutropenia**: Fever or other evidence of infection must be assessed promptly and treated aggressively.

Call Dr. Christopher Lee or tumour group delegate at (604) 877-6000 or 1-800-663-3333 with any problems or questions regarding this treatment program.

REFERENCES:

The Elderly Lung Cancer Vinorelbine Italian Study Group. Effects of vinorelbine on quality of life and survival of elderly patients with advanced non-small-cell lung cancer. J Natl Cancer Inst 1999;91:66-72.