

# BC Cancer Protocol Summary for Palliative Treatment of Patients with Recurrent Malignant Gliomas and Ependymoma Using Low Dose Etoposide

**Protocol Code**

CNETO

**Tumour Group**

Neuro-Oncology

**Contact Physician**

Dr. Rebecca Harrison

## ELIGIBILITY

Patients must have:

- Malignant gliomas, or ependymomas which failed temozolomide-based regimen

Patients should have:

- Adequate bone marrow, hepatic and cardiac function

## TESTS:

- **Baseline:** CBC & Diff, creatinine, ALT, total bilirubin
- **Prior to each cycle:** CBC & Diff, creatinine
- **If clinically indicated:** ALT, alkaline phosphatase, total bilirubin, LDH, total protein, urea, albumin

## PREMEDICATIONS

- Antiemetic protocol for low emetogenic chemotherapy (see protocol SCNAUSEA)
- hydrocortisone and diphenhydramine for history of hypersensitivity to etoposide

## Treatment:

Drug	Dose	BC Cancer Administration Guideline
etoposide	50 mg once daily x 21 days	PO

- Repeat every 28 days until progression or intolerance.

## DOSE MODIFICATIONS:

### 1. Hematology:

ANC (x10 <sup>9</sup> /L)		Platelets (x10 <sup>9</sup> /L)	Etoposide Dose
greater than or equal to 1.5	and	greater than or equal to 100	100%
		less than 100	delay
1.0 to less than 1.5	and	greater than or equal to 100	75%
		less than 100	delay
less than 1.0	and	greater than or equal to 100	delay
		less than 100	delay

- For neutropenic fever, reconsider treatment plan.
2. For serum creatinine 1.5 times upper limit normal, review program.
  3. Hepatic dysfunction: If ALT greater than 5 x ULN or bilirubin greater than 25 micromol/L, review program.

## PRECAUTIONS:

1. **Neutropenia:** Fever or other evidence of infection must be assessed promptly and treated aggressively.

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

## REFERENCES

1. Fulton D; Urtasun R; Forsyth P. Phase II study of prolonged oral therapy with etoposide (VP16) for patients with recurrent malignant glioma. J Neurooncol 1996;27(2):149-55.