

BC Cancer Protocol Summary for Consolidation and Salvage Treatment for Germ Cell Cancer Using vinBLAStine, CISplatin, Ifosfamide and Mesna

Protocol Code: *GUVEIP*

Tumour Group: *Genitourinary*

Contact Physicians: *Dr. Christian Kollmannsberger*
Dr. Bernie Eigl

ELIGIBILITY:

- Gonadal and Extragonadal Germ Cell Tumors (Seminoma or Nonseminoma)
- Relapse after chemotherapy including Etoposide (EP, BEP, VIP2)
- Intolerance to Etoposide

TESTS:

- Repeat abnormal tests q3w (scans optional)
- **Baseline and prior to each cycle:** CBC and diff, platelets, creatinine, [electrolytes panel](#), magnesium, [bilirubin](#), [ALT](#), [alkaline phosphatase](#), [LDH](#), albumin, AFP, beta-hCG [tumour marker](#)
- **Monitor** mental status, hearing, neuropathy
- Urine dipstick pre-treatment and once daily during chemotherapy [for hematuria](#). If positive, notify MD - see supportive care protocol – SCMESNA
- Repeat CBC, diff, platelets and creatinine on day 5.

PREMEDICATIONS:

- Antiemetic protocol for highly emetogenic chemotherapy protocols (see SCNAUSEA).

TREATMENT:

Prehydration (Day 1 only):

- D5W-1/2NS 1000 mL with magnesium sulfate 2 g/L over IV 2 hours.

Hour	Agents	Days				
		1	2	3	4	5
0	vinBLAStine 0.11 mg/kg IV in 50 mL NS over 15 minutes	x	x			
0.5-1	CISplatin 20 mg/m ² IV in 100 mL NS over 30 min	x	x	x	x	x
1-1.25	mesna 300 mg/m ² IV in 100 mL D5W over 15 min	x	x	x	x	
1.5-2.5	ifosfamide 1500 mg/m ² IV in 500 mL D5W-1/2NS over 1 hour	x	x	x	x	
6.5	mesna 300 mg/m ² IV in 100 mL D5W over 15 min	x	x	x	x	
10.5	mesna 300 mg/m ² IV in 100 mL D5W over 15 min	x	x	x	x	
	<u>OR</u> mesna 720 mg/m ² PO in carbonated beverage at Hour 4.5 and 8.5 (ie, 2 and 6 hours after the Ifosfamide)	x	x	x	x	
day 5 only	CISplatin 20 mg/m ² IV in 100 mL NS over 30 min (no mesna)					x

- Cycle length three weeks.
- Hydration at discretion of the oncologist.

SUPPORT MEDICATION

This is chemotherapy is potentially curative. If the patient had extensive previous chemotherapy, filgrastim (G-CSF) may be considered to avoid dose reduction or delays. Treat with filgrastim (G-CSF) in doses sufficient to allow full dose treatment on schedule. Refer to Pharmicare guidelines.

OR may use cotrimoxazole 1 DS tab PO BID starting day 10. If allergic, use ciprofloxacin 500 mg PO BID.

DOSE MODIFICATIONS:

Serum creatinine greater than 150 micromol/L:	prehydrate
Serum creatinine greater than 200 micromol/L:	prehydrate reduce ifosfamide by 25%
Serum creatinine greater than 300 micromol/L:	reduce CISplatin by 25% reduce ifosfamide by 33%
Neutropenic fever:	Filgrastim (G-CSF) may be used for febrile neutropenia. Refer to PharmaCare guidelines.

* Schedule modified, total Ifosfamide dose the same as references below.

Contact Dr. Christian Kollmannsberger, Dr. Bernie Eigl or tumour group delegate at (604) 877-2730 or 1-800-663-3333 with any problems or questions regarding this treatment program.

References:

1. Loehrer PJ, Lauer R, Roth BJ, et al. Salvage Therapy in recurrent germ cell cancer: ifosfamide and cisplatin plus either vinblastine or etoposide. *Ann Int Med* 1988;109:540-6.
2. Miller KD, Loehrer PJ, Einhorn LH. Salvage chemotherapy with vinblastine, ifosfamide and cisplatin in recurrent seminoma: long term follow-up. *Proc. Amer Soc Clin Oncol* 1996;15:240 Abst #596.