

# OVARIAN CANCER CHEMOTHERAPY REGIMENS

The selection, dosing, and administration of anti-cancer agents and the management of associated toxicities are complex. Drug dose modifications and schedule and initiation of supportive care interventions are often necessary because of expected toxicities and because of individual patient variability, prior treatment, and comorbidities. Thus, the optimal delivery of anti-cancer agents requires a healthcare delivery team experienced in the use of such agents and the management of associated toxicities in patients with cancer. The chemotherapy regimens below may include both FDA-approved and unapproved uses/regimens and are provided as references only to the latest treatment strategies. Clinicians must choose and verify treatment options based on the individual patient.

## PRINCIPLES OF THERAPY

- All regimens involving primary chemotherapy/primary adjuvant therapy include intravenous (IV) and intraperitoneal (IP) options, and may be used for epithelial ovarian, primary peritoneal, and Fallopian tube cancers<sup>1</sup>

REGIMEN	DOSING
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### INTRAVENOUS FIRST-LINE THERAPY FOR ADVANCED DISEASE

Paclitaxel (Taxol) + carboplatin (Paraplatin) <sup>1,2</sup>	<b>Day 1:</b> Paclitaxel 175mg/m <sup>2</sup> IV administered over 3 hrs + carboplatin AUC= 7.5mg/mL/min IV administered over 1 hr; repeat every 21 days for 6 cycles
Docetaxel (Taxotere) + carboplatin <sup>1,3</sup>	<b>Day 1:</b> Docetaxel 75mg/m <sup>2</sup> IV + carboplatin AUC= 5mg/mL/min IV, both administered over 1 hr; repeat every 21 days for 6 cycles
Dose-dense paclitaxel + carboplatin <sup>1,4</sup>	<b>Day 1:</b> Carboplatin AUC=6mg/mL/min IV administered over 1 hr plus <b>Days 1, 8, and 15:</b> Paclitaxel 80mg/m <sup>2</sup> IV administered over 1 hr; repeat every 21 days for 6 cycles

### INTRAPERITONEAL FIRST-LINE THERAPY FOR ADVANCED DISEASE

Paclitaxel + cisplatin (Platinol; CDDP) <sup>1,5</sup>	<b>Day 1:</b> Paclitaxel 135mg/m <sup>2</sup> continuous IV infusion then <b>Day 2:</b> Cisplatin 75–100 mg/m <sup>2</sup> IP then <b>Day 8:</b> Paclitaxel 60mg/m <sup>2</sup> IP (maximum body surface area 2m <sup>2</sup> ); repeat every 21 days for 6 cycles
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### INVESTIGATIONAL THERAPIES (NOT FOR FIRST-LINE USE)

Paclitaxel + cisplatin + bevacizumab (Avastin)  *Until study results mature, the addition of bevacizumab to standard paclitaxel + carboplatin therapy cannot be recommended	<b>Cycles 1–6 – Day 1:</b> Paclitaxel 175mg/m <sup>2</sup> IV + carboplatin AUC= 6mg/mL/min IV; repeat every 21 days; plus <b>Cycles 2–6 – Day 1:</b> Bevacizumab 15mg/kg IV; repeat every 21 days, then <b>Cycles 7–22 – Day 1:</b> Bevacizumab 15mg/kg IV monotherapy; repeat every 21 days (GOG Q218 Phase 3 study) <sup>6</sup> ----- <b>Cycles 1–6 – Day 1:</b> Paclitaxel 175mg/m <sup>2</sup> IV + carboplatin AUC= 6mg/mL/min IV + bevacizumab 7.5mg/kg IV; repeat every 21 days, then <b>Cycle 7–18 – Day 1:</b> Bevacizumab 7.5mg/kg IV; repeat every 21 days (ICON7 Phase 3 study) <sup>7</sup>
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