

Regimen Monograph

[Regimen Name](#) | [Drug Regimen](#) | [Cycle Frequency](#) | [Premedication and Supportive Measures](#) | [Administrative Information](#) | [References](#) | [Other Notes](#) | [Disclaimer](#)

A - Regimen Name

BEP(5D)PACL Regimen

bleomycin-etoposide-CISplatin-PACLitaxel

Disease Site Genitourinary - Testis

Intent Curative

Regimen Category **Evidence-informed :**

Regimen is considered appropriate as part of the standard care of patients; meaningfully improves outcomes (survival, quality of life), tolerability or costs compared to alternatives (recommended by the Disease Site Team and national consensus body e.g. pan-Canadian Oncology Drug Review, pCODR). Recommendation is based on an appropriately conducted phase III clinical trial relevant to the Canadian context OR (where phase III trials are not feasible) an appropriately sized phase II trial. Regimens where one or more drugs are not approved by Health Canada for any indication will be identified under Rationale and Use.

This **Regimen Abstract** is an **abbreviated** version of a Regimen Monograph and contains only top level information on usage, dosing, schedule, cycle length and special notes (if available). Information in regimen abstracts is accurate to the extent of the ST-QBP regimen master listings, and has not undergone the full review process of a regimen monograph. Full regimen monographs will be published for each ST-QBP regimen as they are developed.

Rationale and Uses Treatment of previously untreated patients with intermediate risk metastatic germ cell cancer (refer to de Wit et al)

[back to top](#)

B - Drug Regimen

PACLitaxel	175 mg /m ²	IV	Day 1
bleomycin	30 units	IV fixed dose	Days 1, 8 and 15
(cumulative dose of 360 mg in 12 weeks)			
CISplatin	20 mg /m ²	IV	Days 1 to 5
etoposide	100 mg /m ²	IV	Days 1 to 5

Filgrastim was used as primary prophylaxis in the clinical trial

[back to top](#)

C - Cycle Frequency**REPEAT EVERY 21 DAYS**

For a usual total of 4 cycles unless disease progression or unacceptable toxicity occurs

[back to top](#)

D - Premedication and Supportive Measures

Antiemetic Regimen: High (D1-5)
Minimal (D8, 15)

Other Supportive Care:

Also refer to [CCO Antiemetic Recommendations](#).

[back to top](#)

J - Administrative Information

Approximate Patient Visit Day 1: 7 hours; Days 2 to 5: 3 hours; Days 8, 15: 0.5 hour

Pharmacy Workload (average time per visit) 19.421 minutes

Nursing Workload (average time per visit) 49.369 minutes

[back to top](#)

K - References

de Wit R, Skoneczna I, Daugaard G, et al. Randomized phase III study comparing paclitaxel-bleomycin, etoposide, and cisplatin (BEP) to standard BEP in intermediate-prognosis germ-cell cancer: intergroup study EORTC 30983. J Clin Oncol 2012;30(8):792-9.

May 2019 Updated emetic risk category

[back to top](#)

M - Disclaimer

Regimen Abstracts

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Regimen Monographs

Refer to the [New Drug Funding Program](#) or [Ontario Public Drug Programs](#) websites for the most up-to-date public funding information.

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[back to top](#)