

Regimen Monograph

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A - Regimen Name

CISPGEMC(W) Regimen

CISplatin-Gemcitabine

Disease Site Gastrointestinal - Hepatobiliary / Liver / Bile Duct**Intent** Adjuvant**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.

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B - Drug Regimen

CISplatin	25 mg /m ²	IV	Days 1 and 8
gemcitabine	1000 mg /m ²	IV	Days 1 and 8

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

For up to 8 cycles unless disease progression or unacceptable toxicity occurs

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J - Administrative Information

Approximate Patient Visit	3 hours
Pharmacy Workload (average time per visit)	34.104 minutes
Nursing Workload (average time per visit)	46.667 minutes

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K - References

Hezel AF, Zhu AX. Systemic therapy for biliary tract cancers. *Oncologist* 2008;13(4):415-23.

Horgan AM, Amir E, Walter T, et al. Adjuvant therapy in the treatment of biliary tract cancer: a systematic review and meta-analysis. *J Clin Oncol* 2012;30(16):1934-40.

National Comprehensive Cancer Network (NCCN) Clinical Practice Guidelines in Oncology: Hepatobiliary Cancers. V4.2017.

Stein A, Arnold D, Bridgewater J, et al. Adjuvant chemotherapy with gemcitabine and cisplatin compared to observation after curative intent resection of cholangiocarcinoma and muscle invasive gallbladder carcinoma (ACTICCA-1 trial) - a randomized, multidisciplinary, multinational phase III trial. *BMC Cancer* 2015;15:564.

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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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