

Regimen Monograph

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A - Regimen Name

CRBPDOXO Regimen

Carboplatin-DOXOrubicin

Disease Site Sarcoma - Osteogenic / Bone

Intent Adjuvant
Neoadjuvant
Palliative

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 For treatment of patients who are ineligible for cisplatin.

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B - Drug Regimen

DOXOrubicin	75 mg /m ²	IV	Day 1
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CARBOplatin	AUC 5 to 6	IV	Day 1
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May adjust Carboplatin dose to AUC target (using Calvert formula) as outlined in "Other Notes" section.

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

For a usual total of 6 cycles unless disease progression or unacceptable toxicity occurs

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D - Premedication and Supportive Measures

Antiemetic Regimen: High

Febrile Neutropenia Risk: Moderate

Other Supportive Care:

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

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J - Administrative Information

Approximate Patient Visit	2 hours
Pharmacy Workload (average time per visit)	23.135 minutes
Nursing Workload (average time per visit)	54.167 minutes

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K - References

Bramwell VH, Burgers M, Sneath R, et al. A comparison of two short intensive adjuvant chemotherapy regimens in operable osteosarcoma of limbs in children and young adults: the first study of the European Osteosarcoma Intergroup. *J Clin Oncology* 1992; 10: 1579-91.

Bramwell VH, Steward WP, Nooij M, et al. Neoadjuvant chemotherapy with doxorubicin and cisplatin in malignant fibrous histiocytoma of bone: an European Osteosarcoma Intergroup Study. *J Clin Oncology* 1999; 17(10): 3260-69.

Carboplatin, doxorubicin drug monographs, Cancer Care Ontario.

EURAMOS-1 protocol. Children's Oncology Group, 2011.

Souhami RL, Craft AW, Van der Eijken JW, et al. Randomised trial of two regimens of chemotherapy in operable osteosarcoma: a study of the European Osteosarcoma Intergroup. *Lancet* 1997; 350: 911-17.

Lewis IJ, Nooij, MA, Whelan J, et al. Improvement in histologic response but not survival in osteosarcoma patients treated with intensified chemotherapy: a randomized phase III trial of the European Osteosarcoma Intergroup. *J Natl Cancer Inst* 2007; 99: 112-28.

Lewis MJ, Dubois SG, Fligor B, et al. Ototoxicity in Children Treated for Osteosarcoma. *Pediatr Blood Cancer* 2009;52:387–91.

Zalupski MM, Rankin C, Ryan JR, et al. Adjuvant Therapy of Osteosarcoma—A Phase II Trial (SWOG 9139). *Cancer* 2004; 100(4): 818-25.

September 2019 New ST-QBP regimen

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L - Other Notes

Sarcomas are rare tumours and as such benefit from referral to specialized centres where there will be access to multidisciplinary expertise including radiology, orthopedic and thoracic surgery, medical oncology, radiation oncology, pathology, and other supportive care disciplines.

Calvert Formula: (area under the curve method)

DOSE (mg) = target AUC X (GFR + 25)

- AUC = product of serum concentration (mg/mL) and time (min)
- GFR (glomerular filtration rate) expressed as measured Creatinine Clearance or estimated from Serum Creatinine (by Cockcroft and Gault method or Jelliffe method)

Calvert AH, Newell DR, Gumbrell LA, et al, Carboplatin dosage: Prospective evaluation of a simple formula based on renal function. J Clin Oncol, 1989; 7: 1748-1756

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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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