

Regimen Monograph

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A - Regimen Name

DOXO(W) Regimen

DOXOrubicin (low dose)

Disease Site Gynecologic - Endometrial

Intent 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 the treatment of advanced or recurrent endometrial cancer

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B - Drug Regimen[DOXOrubicin](#)10-20 mg /m²

IV

Days 1, 8 and 15

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Until disease progression or unacceptable toxicity, or limited by cardiotoxicity risk

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Approximate Patient Visit	0.5 hour
Pharmacy Workload (average time per visit)	16.415 minutes
Nursing Workload (average time per visit)	41.667 minutes

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Aapro MS, van Wijk FH, Bolis G, et al. Doxorubicin versus doxorubicin and cisplatin in endometrial carcinoma: definitive results of a randomised study (55872) by the EORTC Gynaecological Cancer Group. *Ann Oncol* 2003;14(3):441-8.

Makker V, Hensley ML, Zhou Q, et al. Treatment of Advanced or Recurrent Endometrial Carcinoma with Doxorubicin in Patients Progressing after Paclitaxel/Carboplatin: Memorial Sloan-Kettering Cancer Center (MSKCC) Experience from 1995-2009. *Int J Gynecol Cancer* 2013; 23(5): 929–34.

Thigpen JT, Brady MF, Homesley HD, et al. Phase III trial of doxorubicin with or without cisplatin in advanced endometrial carcinoma: a gynecologic oncology group study. *J Clin Oncol.* 2004;22(19):3902-8.

Doxorubicin drug monograph, Cancer Care Ontario.

PEBC Advice Documents or Guidelines

- [Systemic Therapy for Advanced or Recurrent Endometrial Cancer, and Advanced or Recurrent UPSC](#)

May 2020 Added PEBC guideline link

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M - Disclaimer**Regimen Abstracts**

A 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). It is intended for healthcare providers and is to be used for informational purposes only. It is not intended to constitute or be a substitute for medical advice, and all uses of the Regimen Abstract are subject to clinical judgment. Such information is provided on an “as-is” basis, without any representation, warranty, or condition, whether express, or implied, statutory or otherwise, as to the information’s quality, accuracy, currency, completeness, or reliability, and Cancer Care Ontario disclaims all liability for the use of this information, and for any claims, actions, demands or suits that arise from such use.

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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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