

GALLBLADDER CARCINOMA AND INTRAHEPATIC CHOLANGIOCARCINOMA TREATMENT REGIMENS

The selection, dosing, and administration of anticancer 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 anticancer agents requires a healthcare delivery team experienced in the use of such agents and the management of associated toxicities in patients with cancer. The cancer treatment 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.

NOTE: GREY SHADED BOXES CONTAIN UPDATED REGIMENS.

General treatment note: Clinical trial participation is encouraged first and foremost.¹

REGIMEN	DOSING
Primary Treatment of Advanced Disease (Category 1)	
Gemcitabine (Gemzar) + cisplatin (Platinol; CDDP) ^{1,2}	Days 1 and 8: CDDP 25mg/m ² followed by gemcitabine 1,000mg/m ² . Repeat every 3 weeks for 8 cycles for up to 24 weeks.

Unresectable or Metastatic Disease

<p>There are phase II trials that support the following combinations:^{1,3}</p> <ul style="list-style-type: none"> » Gemcitabine + oxaliplatin » Gemcitabine + capecitabine » Capecitabine + cisplatin » Capecitabine + oxaliplatin » 5-fluorouracil (5-FU) + oxaliplatin » 5-FU + cisplatin » Gemcitabine monotherapy » Capecitabine monotherapy » 5-FU monotherapy 	<p>The collected Phase 2 experience and a comprehensive meta-analysis imply that gemcitabine and gemcitabine-based platinum regimens are slightly advantageous compared with the aforementioned fluoropyrimidine regimens.³</p>
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References

1. NCCN Clinical Practice Guidelines in Oncology™. Hepatobiliary Cancers. v 2.2012. Available at: http://www.nccn.org/professionals/physician_gls/pdf/hepatobiliary.pdf. Accessed March 24, 2012.
2. Valle J, Wasan H, Palmer DH, et al. ABC-02 Trial Investigators. Cisplatin plus gemcitabine versus gemcitabine for biliary tract cancer. *N Engl J Med*. 2010;362:1273–1281.
3. Hezel AF, Zhu AX. Systemic therapy for biliary tract cancers. *Oncologist*. 2008;13:415–423.

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