



# Atezolizumab 1200 / Carboplatin 6 / Nab-Paclitaxel 100, Non-Small Cell Lung Cancer

Protocol-ID: 1238 V1.2 (Standard), ATEZ1200/CRBP6/NPAC100, NSCLC

## Indication(s)

- Lung Carcinoma, Non-Small Cell (non-squamous); ICD-10 C34.-

## Protocol classification

- Classification: alternative
- Intensity: Standard dose
- Therapy mode: First line
- Therapy intention: palliative

## Cycles

Cycle length 21 days, recommended cycles: 6

## Protocol sequences

- [IMpower130: ATEZ1200/CRBP6/NPAC100, NSCLC \(PID1238\) -|- ATEZ1200/CRBP6/NPAC100 - ATEZ1200 maint. \(PID1272\)](#)

## Risks

- Emetogenicity (MASCC/ESMO): high (>90%) Carboplatin combination
- Emetogenicity (MASCC/ESMO): low (10-30%) Nab-paclitaxel
- Neutropenia: very high (>41%) °3-4: 44%
- Thrombocytopenia below 50 000/μl: very high (>41%) °3-4: 45%
- Anemia Hb below 8g/dl: high (16-30%) °3-4: 29%
- Diarrhea: CTC AE °3-4: 5%
- Fatigue: CTC AE °3-4: 6%
- Nausea: CTC AE °3-4: 3%

## Therapy

### Hydration: Balanced Crystalloid Solution

HYD

Access: peripheral venous

Hydration before, during, or after antitumor therapy

Day	Substance	Dosage	Solution	Appl.	Inf. time	Procedure
1	<b>Balanced Crystalloid Solution</b>	500 ml		i.v.	60 min	60 min before Atezolizumab (d1)
8,15	<b>Balanced Crystalloid Solution</b>	500 ml		i.v.	60 min	60 min before Nab-paclitaxel (d8,15)

**Antiemesis: Emetogenicity high (CRBP), FOSAP, GRAN i.v., DEXA i.v.**

AE

Access: peripheral venous

DGHO 2016, DKG 2016, MASCC/ESMO 2016, carboplatin-containing combination therapies

Day	Substance	Dosage	Solution	Appl.	Inf. time	Procedure
1	<b>Fosaprepitant</b>	150 mg	NaCl 0.9% 150 ml	i.v.	20 min	30 min before Atezolizumab (d1)
1	<b>Dexamethasone</b>	12 mg	NaCl 0.9% 50 ml	i.v.	5 min	30 min before Atezolizumab (d1)
1	<b>Granisetron</b>	1 mg	NaCl 0.9% 50 ml	i.v.	5 min	15 min before Atezolizumab (d1)
8,15	<b>Granisetron</b>	1 mg	NaCl 0.9% 50 ml	i.v.	5 min	15 min before Nab-paclitaxel (d8,15)

**Antineoplastic therapy: ATEZ1200/CRBP6/NPAC100**

CTX

Access: peripheral venous

Atezolizumab, carboplatin, and nab-paclitaxel in non-small cell, non-plate epithelial lung cancer

Day	Substance	Dosage	Solution	Appl.	Inf. time	Procedure
1	<b>Atezolizumab</b>	1200 mg	NaCl 0.9% 250 ml	i.v.	60 min	Sequence
If the first infusion was well tolerated, the second infusion can be given over 30 minutes.						
1	<b>Carboplatin</b>	6 AUC	Dextrose 5% 250 ml	i.v.	30 min	Sequence
1,8,15	<b>Nab-paclitaxel</b>	100 mg/m <sup>2</sup> BSA	none	i.v.	30 min	Sequence

**Concomitant therapy supplements**

For highly emetogenic chemotherapy, additional olanzapine is recommended in the acute (day 1) and delayed phases (days 2-4) at a dosing of 5-10 mg per day (NCCN, ESMO, ASCO, Onkopedia; as of 6/24).

Granisetron instead of Dexamethasone for antiemesis on days 8 and 15 to avoid immunosuppression and the risk of infection due to Dexamethasone exposure.

**Notes**

4 or 6 induction cycles were administered, after which patients received atezolizumab as maintenance therapy. Therapy is continued until reduction of clinical benefit or the occurrence of undesirable side effects.

**Controls:**

- Blood count: on day 1 and subsequently weekly
- Echocardiography, ECG Nab-paclitaxel: monitoring for cardiac events, cases of left ventricular dysfunction and congestive heart failure occurred.
- Day 1: TSH, fT3, fT4 Monitor for changes in thyroid function and signs of thyroid disease. Monitor for immune-mediated endocrinopathies at baseline and during therapy.
- Day 1: GOT, GPT, GGT, Bilirubin, AP, Cholinesterase Nab-paclitaxel: Liver monitoring before and during therapy, dose adjustment if necessary. Impairment of liver function possible with carboplatin therapy.
- Day 1: Glomerular Filtration Rate (GFR) monitor immune-mediated nephritis, Carboplatin dose calculation according to AUC and Calvert's formula; in normal renal function, expect a maximum GFR of 125 ml/min to avoid overdoses.

**Original author**

West H (2019)

**Origin**

Thoracic Oncology Program, Swedish Cancer Institute, Seattle, USA, IMpower130

**References**

- West H, Atezolizumab in combination with carboplatin plus nab-paclitaxel chemotherapy compared with chemotherapy alone as first-line treatment for metastatic non-squamous non-small-cell lung cancer (IMpower130): a multicentre, randomised, open-label, phase 3 trial. *Lancet Oncol* 2019 Jul;20(7):924-937. doi: 10.1016/S1470-2045(19)30167-6. PMID: 31122901. [\[PMID\]](#)
- Arbour KC, Impact of Baseline Steroids on Efficacy of Programmed Cell Death-1 and Programmed Death-Ligand 1

## Recommendations

- 01/2023: [European Society for Medical Oncology](#)
- 02/2024: [National Comprehensive Cancer Network](#)

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