Ramucirumab 8 / Paclitaxel 80, adenocarcinoma esophagogastric junction and stomach

Protocol-ID: 327 V1.2 (Standard), RAMU8/PACL80, AEG/Gastric Ca

Indication(s)

- Gastric Cancer; ICD-10 C16.-, C16.0
- Esophageal Cancer (Adenocarcinoma of the esophagogastric junction (AEG)); ICD-10 C15.-

Protocol classification

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

Cycles

Cycle length 28 days, recommended cycles: 5

Risks

- Emetogenicity (MASCC/ESMO): low (10-30%)
- Neutropenia: high (21-40%)
- Febrile Neutropenia: low (<10%)
- Thrombocytopenia below 50 000/µl: low (<10%)
- Anemia Hb below 8g/dl: moderate (6-15%)
- Hypertension: CTC AE °1-2: 10%; °3-4: 14%
- Proteinuria: CTC AE °1-2: 15%; °3-4: 1%
- Fatigue: CTC AE °1-2: 45%; °3-4: 12%
- Infusion Reaction: CTC AE °1-2: 5%; °3-4: 1%
- Hemorrhage: CTC AE °1-2: 38%; °3-4: 5%
- Neuropathy: CTC AE °1-2: 38%; °3-4: 8%

Therapy

Hydration: Balanced Crystalloid Solution **HYD**

Access: peripheral venous

Hydration before, during, or after antitumor therapy

Day	Substance	Dosage	Solution	Appl.	Inf. time	Procedure
1,15	**Balanced Crystalloid Solution**	500 ml		i.v.	60 min	60 min before Ramucirumab (d1,15)
8	**Balanced Crystalloid Solution**	500 ml		i.v.	60 min	60 min before Paclitaxel (d8)

Allergy prophylaxis: Paclitaxel **AP**

Access: peripheral venous

Dexamethasone, dimetinden maleate, cimetidine

Day	Substance	Dosage	Solution	Appl.	Inf. time	Procedure
1,15	**Dexamethasone**	20 mg	NaCl 0.9% 50 ml	i.v.	5 min	30 min before Ramucirumab (d1,15)
8	**Dexamethasone**	20 mg	NaCl 0.9% 50 ml	i.v.	5 min	30 min before Paclitaxel (d8)
1,15	**Dimetinden**	4 mg	NaCl 0.9% 50 ml	i.v.	5 min	30 min before Ramucirumab (d1,15)
8	**Dimetinden**	4 mg	NaCl 0.9% 50 ml	i.v.	5 min	30 min before Paclitaxel (d8)
1,15	**Cimetidine**	300 mg	NaCl 0.9% 50 ml	i.v.	5 min	30 min before Ramucirumab (d1,15)
8	**Cimetidine**	300 mg	NaCl 0.9% 50 ml	i.v.	5 min	30 min before Paclitaxel (d8)

Antineoplastic therapy: RAMU8/PACL80 **CTX**

Access: peripheral venous

Ramucirumab/paclitaxel in advanced adeno-Ca of the stomach and adenco-Ca of the gastroesophageal junction.

Day	Substance	Dosage	Solution	Appl.	Inf. time	Procedure
1,15	**Ramucirumab**	8 mg/kg bw	NaCl 0.9% 250 ml	i.v.	60 min	Sequence
Maximum infusion rate 25 mg/min.						
1,8,15	**Paclitaxel**	80 mg/m² BSA	NaCl 0.9% 250 ml	i.v.	60 min	Sequence

Concomitant therapy supplements

Dexamethasone for antiemesis and Ramucirumab allergy prophylaxis are covered by Paclitaxel allergy prophylaxis.
For infusion reactions, see the respective summary of product characteristics.

Notes

Therapy is continued until progression or the occurrence of unacceptable side effects. In the study, a median of 4.5 cycles were administered (range 2.5-8).

Controls:

- Blood count: on day 1 and subsequently weekly
- ECG Risk of developing a conduction disorder during paclitaxel therapy, ECG monitoring every 3 cycles.
- Day 1: GOT, GPT, GGT, Bilirubin, AP, Cholinesterase Liver function monitoring before and during paclitaxel therapy, Ramucirumab: liver function monitoring before therapy.
- Day 1: Blood pressure Ramucirumab: continuous monitoring before and during therapy
- Day 1: Urine protein excretion Ramucirumab: risk of proteinuria during therapy

Original author

Wilke H (2014)

Origin

Abteilung für Onkologie/Hämatologie, Kliniken Essen-Mitte, Deutschland, RAINBOW Study Group, RAINBOW Studie

References

- Wilke H, Ramucirumab plus paclitaxel versus placebo plus paclitaxel in patients with previously treated advanced gastric or gastro-oesophageal junction adenocarcinoma (RAINBOW): a double-blind, randomised phase 3 trial. Lancet Oncol 2014 Oct;15(11):1224-35. doi: 10.1016/S1470-2045(14)70420-6. PMID: 25240821. [PMID]

Recommendations

- 09/2016: European Society for Medical Oncology
- 06/2021: National Comprehensive Cancer Network

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