

# Stm 天主教聖馬爾定醫院

## 胃癌化療處方集

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癌症類別	胃癌
CCRT	<p>(1) Cisplatin 60 mg/m<sup>2</sup> (N/S 500 c.c.; ≥ 4hrs ) + Epirubicin 50mg/m<sup>2</sup> (N/S 100 c.c. 30 mins) + 5-FU 1500 mg/m<sup>2</sup> (N/S 500 c.c.; ≥ 4hrs ) + Leucovorin 200 m (N/S 500 c.c.; ≥ 4hrs ) q4wks ( Proc. ASCO 1995; 14:197) or                      (A) ↔ (B) q2wks                      { (A) Cisplatin 60 mg/m<sup>2</sup> + 5-FU 1000 mg/m<sup>2</sup> (N/S 500 c.c.; ≥ 4 hrs ) + Leucovorin 100 m (N/S 500 c.c.; ≥ 4 hrs )                      { (B) Epirubicin 50mg/m<sup>2</sup> + 5-FU 1000 mg/m<sup>2</sup> + Leucovorin 100 mg/m<sup>2</sup></p> <p>(2) Cisplatin 60 mg/m<sup>2</sup> + 5-FU 2000 mg/m<sup>2</sup> (N/S 500 c.c.; ≥ 4hrs ) + Leucovorin 200 mg (N/S 500 c.c.; ≥ 4hrs ) (Hepatogastroenterology 45(25), 594-600 Jan-Feb 1999)</p>
Neoadjuvant	<p>(1) Cisplatin 60 mg/m<sup>2</sup> (N/S 500 c.c.; ≥ 4hrs ) + Epirubicin 50mg/m<sup>2</sup> (N/S 100 c.c. 30 mins) + 5-FU 1500 mg/m<sup>2</sup> (N/S 500 c.c.; ≥ 4hrs ) + Leucovorin 200 m (N/S 500 c.c.; ≥ 4hrs ) q4wks ( Proc. ASCO 1995; 14:197) or                      (A) ↔ (B) q2wks                      { (A) Cisplatin 60 mg/m<sup>2</sup> + 5-FU 1000 mg/m<sup>2</sup> (N/S 500 c.c.; ≥ 4 hrs ) + Leucovorin 100 m (N/S 500 c.c.; ≥ 4 hrs )                      { (B) Epirubicin 50mg/m<sup>2</sup> + 5-FU 1000 mg/m<sup>2</sup> + Leucovorin 100 mg/m<sup>2</sup></p> <p>(2) Cisplatin 60 mg/m<sup>2</sup> + 5-FU 2000 mg/m<sup>2</sup> (N/S 500 c.c.; ≥ 4hrs ) + Leucovorin 200 mg (N/S 500 c.c.; ≥ 4hrs ) (Hepatogastroenterology 45(25), 594-600 Jan-Feb 1999)</p> <p>(3) Oxaliplatin 85 mg/m<sup>2</sup> (D5W 500 c.c.; ≥ 3 hrs) q2wks + Capecitabine 1250-1500 mg/m<sup>2</sup>/d. (2:1 or 5:2) (for metastatic or locally advanced disease ) (Br J Cancer 2006 Apr 10;94(7): 959-963) (健保條例規範；for advanced stage IIB、IIIA、IIIB、IIIC、IV)</p> <p>(4) Docetaxel 60,75mg/ m<sup>2</sup> (N/S 100 c.c.; 1hr) q 4wks or 35,40 mg/m<sup>2</sup> (N/S 100 c.c.; 1hr) q 2 wks (JCO, Nov. 2006 4991-4997) (健保條例規範；for advanced stage IIB、IIIA、IIIB、IIIC、IV；E-G junction adenocarcinoma ≥ IIB included)</p> <p>(5) Cisplatin(劑量同上)+Docetaxel(劑量同上)                      (健保條例規範；for advanced stage IIB、IIIA、IIIB、IIIC、IV；E-G junction adenocarcinoma ≥ IIB included)</p> <p>© [ UFUR 900-1100 mg/m<sup>2</sup>/d + Leucovorin 30 mg/d ] or [ Capecitabine 1250-1500 mg/m<sup>2</sup>/d (2:1 or 5:2) ] or [ v. 5-FU/LV ]                      可互相取代，但需在健保條例規範之下(否則需注意自費之問題)</p>

癌症類別	胃癌
Adjuvant	<p><b>For stage <math>\geq</math> IB~IIA , only :</b></p> <p>(1) Cisplatin 60 mg/m<sup>2</sup> (N/S 500 c.c.; <math>\geq</math> 4hrs ) + Epirubicin 50mg/m<sup>2</sup> (N/S 100 c.c. 30 mins) + 5-FU 1500 mg/m<sup>2</sup> (N/S 500 c.c.; <math>\geq</math> 4hrs ) + Leucovorin 200 m (N/S 500 c.c.; <math>\geq</math> 4hrs ) q4wks VI ( Proc. ASCO 1995; 14:197) <b>or</b></p> <p>(A) <math>\leftrightarrow</math> (B) q2wks VI</p> <p>{ (A) Cisplatin 60 mg/m<sup>2</sup> + 5-FU 1000 mg/m<sup>2</sup> (N/S 500 c.c.; <math>\geq</math> 4 hrs ) + Leucovorin 100 m (N/S 500 c.c.; <math>\geq</math> 4 hrs )</p> <p>{ (B) Epirubicin 50mg/m<sup>2</sup> + 5-FU 1000 mg/m<sup>2</sup> + Leucovorin 100 mg/m<sup>2</sup></p> <p>(2) Cisplatin 60 mg/m<sup>2</sup> + 5-FU 2000 mg/m<sup>2</sup> (N/S 500 c.c.; <math>\geq</math> 4hrs ) + Leucovorin 200 mg (N/S 500 c.c.; <math>\geq</math> 4hrs ) VI (Hepatogastroenterology 45(25), 594-600 Jan-Feb 1999)</p> <p><b>For stage <math>\geq</math> IIB~IIIC ( E-G junction adenocarcinoma <math>\geq</math> IIB included ) , only :</b></p> <p>(1) Cisplatin 60 mg/m<sup>2</sup> (N/S 500 c.c.; <math>\geq</math> 4hrs ) + Epirubicin 50mg/m<sup>2</sup> (N/S 100 c.c. 30 mins) + 5-FU 1500 mg/m<sup>2</sup> (N/S 500 c.c.; <math>\geq</math> 4hrs ) + Leucovorin 200 m (N/S 500 c.c.; <math>\geq</math> 4hrs ) q4wks VI ( Proc. ASCO 1995; 14:197) <b>or</b></p> <p>(A) <math>\leftrightarrow</math> (B) q2wks VI</p> <p>{ (A) Cisplatin 60 mg/m<sup>2</sup> + 5-FU 1000 mg/m<sup>2</sup> (N/S 500 c.c.; <math>\geq</math> 4 hrs ) + Leucovorin 100 m (N/S 500 c.c.; <math>\geq</math> 4 hrs )</p> <p>{ (B) Epirubicin 50mg/m<sup>2</sup> + 5-FU 1000 mg/m<sup>2</sup> + Leucovorin 100 mg/m<sup>2</sup></p> <p>(2) Cisplatin 60 mg/m<sup>2</sup> + 5-FU 2000 mg/m<sup>2</sup> (N/S 500 c.c.; <math>\geq</math> 4hrs ) + Leucovorin 200 mg (N/S 500 c.c.; <math>\geq</math> 4hrs ) VI (Hepatogastroenterology 45(25), 594-600 Jan-Feb 1999)</p> <p>(3) Oxaliplatin 85 mg/m<sup>2</sup> (D5W 500 c.c.; <math>\geq</math> 3 hrs) q2wks + Capecitabine 1250-1500 mg/m<sup>2</sup>/d. (2:1 or 5:2) x 12 doses (Br J Cancer 2006 Apr 10;94(7): 959-963)(健保條例規範；for advanced stage IIB、IIIA、IIIB、IIIC)</p> <p>(4) Docetaxel 60,75mg/ m<sup>2</sup> (N/S 100 c.c.; 1hr) q 4wks <b>or</b> 35,40 mg/m<sup>2</sup> (N/S 100 c.c.; 1hr) q 2 wks VI (JCO, Nov. 2006 4991-4997)(健保條例規範；for advanced stage IIB、IIIA、IIIB、IIIC；E-G junction adenocarcinoma <math>\geq</math> IIB included)</p> <p>(5) Cisplatin(劑量同上)+ Docetaxel(劑量同上) VI (健保條例規範；for advanced stage IIB、IIIA、IIIB、IIIC；E-G junction adenocarcinoma <math>\geq</math> IIB included)</p> <p>(6) Tegafur &amp; Gimeracil &amp; Oteracil TS-1(2:1) : 1-yr adjuvant only for stage II、IIIA、IIIB BSA : &lt; 1.25 m<sup>2</sup> : 40 mg bid ; BSA : 1.25-1.5 m<sup>2</sup> : 50 mg bid ; BSA : <math>\geq</math> 1.5 m<sup>2</sup> : 60 mg bid ; (JCO, May 2009 4511-4511)</p> <p>© [ UFUR 900-1100 mg/m<sup>2</sup>/d + Leucovorin 30 mg/d ] <b>or</b> [ Capecitabine 1250-1500 mg/m<sup>2</sup>/d (2:1 or 5:2) ] <b>or</b> [ v. 5-FU/LV ] 可互相取代，但需在健保條例規範之下(否則需注意自費之問題)</p>

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Palliative	<p>(1) Cisplatin 60 mg/m<sup>2</sup> (N/S 500 c.c.; ≥ 4hrs ) + Epirubicin 50mg/m<sup>2</sup> (N/S 100 c.c. 30 mins) + 5-FU 1500 mg/m<sup>2</sup> (N/S 500 c.c.; ≥ 4hrs ) + Leucovorin 200 m (N/S 500 c.c.; ≥ 4hrs ) q4wks ( Proc. ASCO 1995; 14:197) <b>or</b>  (A) ↔ (B) q2wks  { (A) Cisplatin 60 mg/m<sup>2</sup> + 5-FU 1000 mg/m<sup>2</sup> (N/S 500 c.c.; ≥ 4 hrs ) + Leucovorin 100 m (N/S 500 c.c.; ≥ 4 hrs )  (B) Epirubicin 50mg/m<sup>2</sup> + 5-FU 1000 mg/m<sup>2</sup> + Leucovorin 100 mg/m<sup>2</sup></p> <p>(2) Cisplatin 60 mg/m<sup>2</sup> + 5-FU 2000 mg/m<sup>2</sup> (N/S 500 c.c.; ≥ 4hrs ) + Leucovorin 200 mg (N/S 500 c.c.; ≥ 4hrs ) (Hepatogastroenterology 45(25), 594-600 Jan-Feb 1999)</p> <p>(3) Oxaliplatin 85 mg/m<sup>2</sup> (D5W 500 c.c.; ≥ 3 hrs) q2wks + Capecitabine 1250-1500 mg/m<sup>2</sup>/d. (2:1 or 5:2) (Br J Cancer 2006 Apr 10;94(7): 959-963)</p> <p>(4) Docetaxel 60,75mg/ m<sup>2</sup> (N/S 100 c.c.; 1hr) q 4wks <b>or</b> 35,40 mg/m<sup>2</sup> (N/S 100 c.c.; 1hr) q 2 wks (JCO, Nov. 2006 4991-4997) (健保條例規範； for advanced stage IIB、IIIA、IIIB、IIIC、IV； E-G junction adenocarcinoma ≥ IIB included )</p> <p>(5) Cisplatin(劑量同上)+Docetaxel(劑量同上) (健保條例規範； for advanced stage IIB、IIIA、IIIB、IIIC、IV； E-G junction adenocarcinoma ≥ IIB included )</p> <p>(6) Paclitaxel 135mg/m<sup>2</sup> (N/S 500 c.c.; 3 hrs) q4wks (or 85 mg/m<sup>2</sup> (N/S 300 c.c.; 2hrs) q 2wks) (Br J Cancer 2000 Jul; 83(4):458-462) (亦可與 5-FU (UFUR or Capecitabine) 併用)</p> <p>(7) UFUR+LV <b>or</b> v. 5-FU/LV</p> <p>◎ [ UFUR 900-1100 mg/m<sup>2</sup>/d + Leucovorin 30 mg/d ] <b>or</b> [ Capecitabine 1250-1500 mg/m<sup>2</sup>/d (2:1 or 5:2) ] <b>or</b> [ v. 5-FU/LV ] 可互相取代，但需在健保條例規範之下(否則需注意自費之問題)</p> <p>◎亦可考慮下列藥物：</p> <ul style="list-style-type: none"> <li>* MMC 8mg / m<sup>2</sup> (N/S 100 c.c.; 30 mins) q 4 wks (Br J Cancer 2002 Jan21; 86(2):213-217)</li> <li>* Irinotecan 140,150,160 mg/ m<sup>2</sup> (N/S 500 c.c.; 3 hrs) q2 wks (Oncology Dec. 1, 2000)</li> <li>* Pemetrexed 500mg/ m<sup>2</sup> (N/S 100 c.c.; 20 mins) q 4wks (Clinical Cancer Research Jun 2004 Vol.10 Issue12)</li> </ul>