

Stm 天主教聖馬爾定醫院

Chemotherapy Regimes

最初出版日期：99.04

最後更新日期：115.03

癌症類別	HD													
淋巴癌	(A) Classical type (I) Stage $\leq$ II ABVD 3-6 cycles ($\pm$ R/T) <table><tr><td rowspan="4">{</td><td>Epirubicin</td><td>30 mg/m² (N/S 100 c.c.; 30 mins)</td><td>D1,15</td></tr><tr><td>Bleomycin</td><td>8 mg/m² (N/S 100 c.c.; 30 mins)</td><td>D1,15</td></tr><tr><td>Oncovin</td><td>1.4 mg/m²(max 2mg) (N/S 100 c.c.; 30 mins)</td><td>D1,15</td></tr><tr><td>Dacarbazine</td><td>375 mg/m² (N/S 500 c.c.; 4 hrs)</td><td>D1,15</td></tr></table> (N Endl J Med 2010;363:640-652)	{	Epirubicin	30 mg/m ² (N/S 100 c.c.; 30 mins)	D1,15	Bleomycin	8 mg/m ² (N/S 100 c.c.; 30 mins)	D1,15	Oncovin	1.4 mg/m ² (max 2mg) (N/S 100 c.c.; 30 mins)	D1,15	Dacarbazine	375 mg/m ² (N/S 500 c.c.; 4 hrs)	D1,15
{	Epirubicin		30 mg/m ² (N/S 100 c.c.; 30 mins)	D1,15										
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淋巴瘤	(A) Classical type (II) Stage III~IV 1.ABVD 6 cycles Epirubicin 30 mg/m² (N/S 100 c.c.; 30 mins) D1,15 Bleomycin 8 mg/m² (N/S 100 c.c.; 30 mins) D1,15 Oncovin 1.4 mg/m²(max 2mg) (N/S 100 c.c.; 30 mins) D1,15 Dacarbazine 375 mg/m² (N/S 500 c.c.; 4 hrs) D1,15 (J Clin Oncol 2010;28:4199-4206)
	(III) Stage IV(IPS Score:4-7 分；CD30+；treatment naïve)
	1. <u>BV-AVD，Q4wk*6 cycles</u>
	<u>Brentuximab vedotin 1.2mg/kg (N/S 100 c.c.; 30 mins) D1,15</u> <u>Epirubicin 30mg/ m2 (N/S 100 c.c.; 30 mins) D1,15</u> <u>Oncovin 1.4 mg/m2(max 2mg) (N/S 100 c.c.; 30 mins)D1,15</u> <u>Dacarbazine 375 mg/m2 (N/S 500 c.c.; 4 hrs) D1,15</u>
	<u>(NEJM 2018；378:331-344)</u>

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淋巴瘤	(B) Lymphocyte-predominant type 1.ABVD+(*Rituximab) 6-8 cycles - Epirubicin 30 mg/m² (N/S 100 c.c.; 30 mins) D1,15 - Bleomycin 8 mg/m² (N/S 100 c.c.; 30 mins) D1,15 - Oncovin 1.4 mg/m²(max 2mg) (N/S 100 c.c.; 30 mins) D1,15 - Dacarbazine 375 mg/m² (N/S 500 c.c.; 4 hrs) D1,15 *Rituximab 375 mg/m² (N/S 500 c.c.; ≥ 4 hrs) or *Rituximab 1400mg S.C. (Blood 2011;118:4585-4590)(Blood 2013; 122:4182-4188) 2. CHOP+ (* Rituximab) - Endoxan 600,750 mg/m² (N/S 300 c.c.; 2 hrs) D1 - Epirubicin 50 mg/m² (N/S 100 c.c.; 30 mins) D1 - Oncovin 1.4mg/m² (max.2mg) (N/S 100 c.c.; 30 mins) D1 - Solu-medrol 125 mg 125 mg v. D1-3 *Rituximab 375 mg/m² (N/S 500 c.c.; ≥ 4 hrs) or *Rituximab 1400mg S.C. (ASH Annual Meeting Abstract 2010;106:2812) (Blood 2013; 122:4182-4188)

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癌症類別	HD
淋巴癌	3. .EPOCH+ (*Rituximab) - Etoposide 50 mg/ m²/d (N/S 500 c.c./d) C.I. 24hrs D1 ~4 - Oncovin 0.4 mg/ m²/d (N/S 500 c.c./d) C.I. 24hrs D1 ~4 - Epirubicin 14 mg/ m²/d (N/S 500 c.c./d) C.I. 24hrs D1 ~4 - Solu-medrol 125 mg v. D1 ~5 (or prednisolone 60mg/ m² D1 ~5) - Endoxan 750 mg/m² (N/S 300 c.c.; 2 hrs) D5 *Rituximab 375 mg/m² (N/S 500 c.c.; ≥ 4 hrs) D1 or D6) or *Rituximab 1400mg S.C. (Annals of oncology 2004; 15(3): 511-516) 4. *Rituximab 375 mg/m² (N/S 500 c.c.; ≥ 4 hrs) or *Rituximab 1400mg S.C.

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癌症類別	SLL/CLL
淋巴瘤	(I) First-line 1. Endoxan p.o. 50,100 mg/d or Endoxan 600mg/m² (N/S 300 c.c.; 2 hrs) q 4wks 2. Prednisolone 100mg/m²/d or Solu-medrol 125 mg/d × 5 days q 4wks 3. Rituximab 375 mg/m² (N/S 500 c.c.; ≥ 4 hrs) or Rituximab 1400mg S.C. 4. Obinutuzuma+chlorambucil (113/2/1 申請條件依健保給付規定 9.79) (<u>N Engl J Med 2014;370(12):1101-1110</u>) ● In cycle 1 ● Obinutuzumab 1000mg (N/S 500ml, ≥ 4 hrs) on D1, D8. D15(dose titrate as protocol) ● Chlorambucil 0.5mg/kg po on D1. D15 ● In Cycle 2-6 ● Obinutuzumab 1000mg (N/S 500ml, ≥ 4 hrs) on D1, ● Chlorambucil 0.5mg/kg po on D1. D15

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癌症類別	SLL/CLL
淋巴癌	(I) First-line (Conti.) 5. CVP ● Endoxan 600 mg/m² (N/S 300 c.c.; 2 hrs) D1 or 300 mg/m²/d p.o. D1-5 ● Oncovin 1.4 mg/ m² (max.2mg) (N/S 100 c.c.; 30 mins) D1 ● Solu- medrpl 125 mg v. D1-D3 (Blood 2001;98:2319-2325) 6. Bendamustine 90 mg /m² (N/S 100 c.c.; 1 hr) D1,2 q 28 days + Rituximab 375 mg/ m² or rituximab 1400mg SC D1 or D4 * 6 cycles (J Clin Oncol 2014;32:1236-1241) 7. Monotherapy: Bendamustine 100 mg/ m² D1,D2 q 28 days * 6 cycles 8. Fludarabine 25 mg/m²/d (N/S 100 c.c.; 1 hr) D1-5 * 6 cycles Rituximab 375 mg/m² (N/S 500 c.c.; ≥ 4 hrs) D1 or D7 or Rituximab 1400mg S.C. (Blood 2003;101:6-14)

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癌症類別	SLL/CLL
淋巴瘤	(I) First-line (Cont.) 9. FCR { Fludarabine 25 mg/m²/d (N/S 100 c.c.; 1 hr) D1-3 Cyclophosphamide 600,750 mg/m² (N/S 300 c.c.; 2 hrs) Rituximab 375 mg/m² (N/S 500 c.c.; ≥ 4 hrs) D1 or D5 or Rituximab 1400mg S.C. (Blood 2011;117:3016-3024) 10. FR (Fludarabine、Rituximab) { Fludarabine 25 mg/m²/d (N/S 100 c.c.; 1 hr) D1-5 Rituximab 375 mg/m² (N/S 500 c.c.; ≥ 4 hrs) D1 or D7 or Rituximab 1400mg S.C. (Blood 2003;101:6-14) 11. <u>單獨使用於具有 17p 缺失的慢性淋巴球性白血病(CLL)成年患者</u> ● Ibrutinib 560mg po QD (blood adv. 2022;6:3440-3450) ● Acalabrutinib 100mg po BID (J Clin Oncol 2021; 39:344-3452) ● Zanubrutinib 160mg po BID or 320mg po QD (Lancet Oncol 2022;23:1031-1043)

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淋巴瘤	(II) 2nd-line Tx (if not use in first-line) 1. Fludarabine 25 mg/m²/d (N/S 100 c.c.; 1 hr) D1-5 2.FC { Fludarabine 25 mg/m²/d (N/S 100 c.c.; 1 hr) D1-3 { Endoxan 600,750 mg/m² (N/S 300 c.c.; 2 hrs) D1 (Ther Clin Risk Manag 2009; 5:187-207) 3.reduced-dose FCR { Fludarabine 25 mg/m²/d (N/S 100 c.c.; 1 hr) D1-3 { Cyclophosphamide 600,750 mg/m² (N/S 300 c.c.; 2 hrs) D1 { Rituximab 375 mg/m² (N/S 500 c.c.; ≥ 4 hrs) D1 or D5 or Rituximab 1400mg S.C. (Leuk Res 2014.Aug; 38(8): 891-5) 4.reduced-dose FR { Fludarabine 25 mg/m²/d (N/S 100 c.c.; 1 hr) D1-5 { Rituximab 375 mg/m² (N/S 500 c.c.; ≥ 4 hrs) D7 or Rituximab 1400mg S.C. (Cancer Control 2015 Oct; 22(4): 17-23) 5. Rituximab 375mg/m² (N/S 500 c.c.; ≥ 4 hrs) or Rituximab 1400mg S.C. q3wks

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淋巴瘤	(II) 2nd-line Tx (cont.) 6. FCR Fludarabine 25 mg/m²/d (N/S 100 c.c.; 1 hr) D1-3 Cyclophosphamide 600,750 mg/m² (N/S 300 c.c.; 2 hrs) D1 Rituximab 375mg/m² (N/S 500 c.c.; ≥ 4 hrs) D5 or Rituximab 1400mg S.C. (Blood 2011:117:3016-3024) 7. R-CHOP(with methylprednisolone) Epirubicin 50 mg/m² (N/S 100 c.c.; 30 mins) D1 Oncovin 1.4mg/m² (max.2mg) (N/S 100 c.c.; 30 mins) D1 Endoxan 600,750 mg/m² (N/S 300 c.c.; 2 hrs) Solu-medrol 125 mg 125 mg v. D1-3 Rituximab 375 mg/m² (N/S 500 c.c.; ≥ 4 hrs) D1 or D3 or Rituximab 1400mg S.C. (Blood 2010;116:2040-2045) 8. R-CHOP (with prednisolone) Cyclophosphamide (600,750) mg/ m² + N/S 300 cc ivd 2 hrs Epirubicin 50 mg/ m² + N/S 100 cc 30 mins Vincristine 1.4 mg/ m² (max 2mg) + N/S 100 cc ivd 30 mins Prednisolone 100mg/day x 5 days Rituximab 375 mg/m² (N/S 500 c.c.; ≥ 4 hrs) D1 or D3 or Rituximab 1400mg S.C.

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癌症類別	SLL/CLL
淋巴瘤	(II) 2nd-line Tx (cont.) 9.R-mini-CHOP (with methylprednisolone) Cyclophosphamide 400 mg/ m² + N/S 300 cc ivd 2 hrs Epirubicin 40 mg/ m² + N/S 100 cc 30 mins Vincristine 1 mg + N/S 100 cc ivd 30 mins Solu-medrol 125 mg ivp on D1-D3 Rituximab 375 mg/m² (N/S 500 c.c.; ≥ 4 hrs) D1 or D3 or Rituximab 1400mg S.C. 10. R-mini-CHOP (with prednisolone) Cyclophosphamide 400 mg/ m² + N/S 300 cc ivd 2 hrs Epirubicin 40 mg/ m² + N/S 100 cc 30 mins Vincristine 1 mg + N/S 100 cc ivd 30 mins Prednisolone 100mg/day po x 5 days Rituximab 375 mg/m² (N/S 500 c.c.; ≥ 4 hrs) D1 or D3 or Rituximab 1400mg S.C. 11. Bendamustine 100mg/ m² D1,D2 (monotherapy) 12. Bendamustine 90mg/ m² D1,D2 Rituximab 375mg/ m² or 1400mg S.C. , D1 , D2 13. venetoclax (17p 缺失): titrate as protocol, max 400mg po QD). (J Adv. Pract. Oncol 2017; 38(6): 647-652) <u>14. Acalabrutinib (非 IGHV 突變): 100mg po BID (J Clin Oncol2021; 39:344-3452)</u> <u>15. Zanubrutinib (非 IGHV 突變): 160mg po BID or 320mg po QD (Lancet Oncol 2022;23:1031-1043)</u> (III) 3rd-line Tx 1. <u>Acalabrutinib (二線以上治療惡化):100mg po BID (J Clin Oncol2021; 39:344-3452)</u> 2. <u>Zanubrutinib (非 IGHV 突變): 160mg po BID or 320mg po QD (Lancet Oncol 2022;23:1031-1043)</u>

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癌症類別	Follicular Lymphoma(classic FL , gr1 , 2 , 3A ; gr3B as DLBCL)
淋巴瘤	(A) 1st-line Tx 1.R-CHOP(with methylprednisolone) Epirubicin 50 mg/m² (N/S 100 c.c.; 30 mins) D1 Oncovin 1.4mg/m² (max.2mg) (N/S 100 c.c.; 30 mins) D1 Endoxan 600,750 mg/m² (N/S 300 c.c.; 2 hrs) Solu-medrol 125 mg 125 mg v. D1-3 Rituximab 375 mg/m² (N/S 500 c.c.; ≥ 4 hrs) D1 or D3 or Rituximab 1400mg S.C. (Blood 2010;116:2040-2045) 2. R-CHOP (with prednisolone) Cyclophosphamide (600,750) mg/ m² + N/S 300 cc ivd 2 hrs Epirubicin 50 mg/ m² + N/S 100 cc 30 mins Vincristine 1.4 mg/ m² (max 2mg) + N/S 100 cc ivd 30 mins Prednisolone 100mg/day x 5 days Rituximab 375 mg/m² (N/S 500 c.c.; ≥ 4 hrs) D1 or D3 or Rituximab 1400mg S.C. 3.R-mini-CHOP (with methylprednisolone) Cyclophosphamide 400 mg/ m² + N/S 300 cc ivd 2 hrs Epirubicin 40 mg/ m² + N/S 100 cc 30 mins Vincristine 1 mg + N/S 100 cc ivd 30 mins Solu-medrol 125 mg ivp on D1-D3 Rituximab 375 mg/m² (N/S 500 c.c.; ≥ 4 hrs) D1 or D3 or Rituximab 1400mg S.C.

淋巴瘤	4. R-mini-CHOP (with prednisolone) Cyclophosphamide 400 mg/ m² + N/S 300 cc ivd 2 hrs Epirubicin 40 mg/ m² + N/S 100 cc 30 mins Vincristine 1 mg + N/S 100 cc ivd 30 mins Prednisolone 100mg/day po x 5 days Rituximab 375 mg/m² (N/S 500 c.c.; ≥ 4 hrs) D1 or D3 or Rituximab 1400mg S.C. 5.R-COP { Endoxan 600,750 mg/m² (N/S 300 c.c.; 2 hrs) D1 { Oncovin 1.4mg/m² (max.2mg) (N/S 100 c.c.; 30 mins) D1 { Solu-medrol 125 mg v. D1-3 { Rituximab 375 mg/m² (N/S 500 c.c.; ≥ 4 hrs) or Rituximab 1400mg S.C. D1 or D3 (J Clin Oncol 2008;206:4579-4586) 6.Bendamustine 90mg/m² D1 , D2 Rituximab 375mg/m² or 1400mg S.C. D1 , D3 Q3wk*6 cycles (B) Extended maintenance therapy : Rituximab 375mg/m² or 1400mg S.C. Q3M*8 cycles
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淋巴瘤	C) 2nd-line Tx(not including SCT) 1. Bendamustine 90 mg /m² (N/S 100 c.c.; 1 hr) D1,2 q 28 days + Rituximab 375 mg/m² (N/S 500 c.c.; ≥ 4 hrs) or Rituximab 1400mg S.C.* 6 cycles (Lancet 2013;381:1203-1210) 2. Monotherapy: Bendamustine 100 mg/ m² (N/S 100 c.c.; 1 hr) D1,D2 q 28 days * 6 cycles (J Clin Oncol 2008; 26:4473-4479) 3.FR ● Fludarabine 25 mg/m²/d (N/S 100 c.c.; 1 hr) D1-5 ● Rituximab 375 mg/m² (N/S 500 c.c.; ≥ 4 hrs) D1 or D7 or Rituximab 1400mg S.C. (J Clin Oncol 2005;23:694-704) 4.Obinutuzumab+Bendamustin ● In cycle 1 ■ Obiutuzumab 1000mg (N/S 500ml , ≥ 4 hrs) on D1, D8. D15(dose titrate as protocol) ■ Bendamustine 90mg/m² (N/S 100ml, 1hr) on D1. D2 ● In cycle 2 ■ Obiutuzumab 1000mg (N/S 500ml , ≥ 4 hrs) on D1 ■ Bendamustine 90mg/m² (N/S 100ml, 1hr) on D1. D2
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癌症類別	Mantle cell lymphoma
淋巴瘤	(A) 1st-line Tx 1.COP { Endoxan 600,750 mg/m² (N/S 300 c.c.; 2 hrs) D1 { Oncovin 1.4mg/m² (max.2mg) (N/S 100 c.c.; 30 mins) D1 { Solu-medrol 125 mg v. D1-3 2.CHOP { Epirubicin 50 mg/m² (N/S 100 c.c.; 30 mins) D1 { Oncovin 1.4mg/m² (max.2mg) (N/S 100 c.c.; 30 mins) D1 { Endoxan 600,750 mg/m² (N/S 300 c.c.; 2 hrs) D1 { Solu-medrol 125 mg v. D1-3 *Rituximab 375 mg/m² (N/S 500 c.c.; ≥ 4 hrs) D1 or D3 or Rituximab 1400mg S.C. (J Clin Oncol 2005;23:1984-1992) 3. Hyper CVAD A ↔ B q4wks (A) Epirubicin 50 mg/m² + N/S 100 cc ivd 30 mins on D4 { Vincristine 1.4 mg/m² (max 2mg) + N/S 100 cc ivd 30 mins on D4 { Cyclophosphamide 300 mg/m² + N/S 300 cc ivd 2 hrs q12h on D1-D3 (6 doses) { Mesna 600 mg/m²+ N/S 500 cc ivd 24 hrs on D1-D3 { Vincristine 1.4 mg/m² (max 2mg) + N/S 100 cc ivd 30 mins on D11 { Dexamethasone 40 mg p.o. or v. D1-4 & D11-14

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淋巴瘤	(B) - MTX 200 mg/m² (N/S 500 c.c.; 3hrs) D1 - MTX 800 mg/m² (N/S 500 c.c.; 24 hrs) D1 - Leucovorin 15mg gid × 10 days - Ara-C 3g/m² (N/S 500 c.c.; 3hrs) q12h × 4 doses D2,3 (J Clin Oncol 2005;23:7013-7023) (Br J Haematol 2012;156:346-353) 4. Bendamustine 90mg/m² D1, D2 Rituximab 375mg/m² or 1400mg S.C. D1 or D3 (Stage III~IV 不適合移植) 5. Bortezomid-based regimen (VR-CAP) (Lancet Oncol 2018; 19: 1449-1458) Velcade 1.3mg/m² SC on D1,4,8,11 Rituximab 375mg/m² (N/S 500 c.c.; ≥ 4 hr) or 1400mg SC D0, D1 Epirubicin 50mg/m² (N/S 100ml; 1 hr) on D1 Cyclophosphamide 750mg/m² (N/S 500ml; 3 hrs) D1 (B) 2-line Tx 1. Bendamustine 90 mg /m² (N/S 100 c.c.; 1 hr) D1,2 q 28 days + Rituximab 375 mg/ m² (N/S 500 c.c.; 4 hrs) D1 or D4 * or Rituximab 1400mg S.C.*6 cycles or Monotherapy: Bendamustine 100 mg/ m² D1,D2 q 28 days * 6 cycles (J Clin Oncol 2008; 26:4473-4479)

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淋巴瘤	2. R-EPOCH - Etoposide 50 mg/ m² /d (N/S 500 c.c./d) C.I. 24hrs D1 ~4 - Oncovin 0.4 mg/ m² /d (N/S 500 c.c./d) C.I. 24hrs D1 ~4 - Epirubicin 14 mg/ m² /d (N/S 500 c.c./d) C.I. 24hrs D1 ~4 - Solu-medrol 125 mg v. D1 ~5(or prednisolone 60mg/ m²/d on D1-D5) - Endoxan 750 mg/m² (N/S 300 c.c.; 2 hrs) D5 - Rituximab 375 mg/m² (N/S 500 c.c.; ≥ 4 hrs) D1 or D6 or Rituximab 1400mg S.C. (Annals of oncology 2004; 15(3): 511-516) 3. R- ESHAP - Etoposide 40 mg/ m²/d (N/S 500 c.c.; 3 hrs) D1-4 - Cisplatin 60 mg/m² (N/S 500 c.c.; 24 hrs) D4 or 25 mg/m²/d (N/S 500 c.c./d) C.I. D1-4 - Ara-C 2 g/m² (N/S 500 c.c.; 3hrs) D5 - Solu-medrol 500 mg v. D1-5 - Rituximab 375mg/m² (N/S 500 c.c.; ≥ 4 hrs) D1 or D6 or Rituximab 1400mg S.C. (Hematologica. 2008; 93(12):1829-1836) 4. Acalabrutinib 150m po BID (Leukemia 2019; 33:2762-2766) 5. Zanubrutinib 160mg po BID or 320mg po QD (Blood Adv. 2021;5:2577-2585) 6. Bortezomib-base C/T(一線未使用) 7. Ibrutinib 560mg po QD (Blood 2015; 126:739-745)

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淋巴瘤	(A) 1st-line Tx 1.R-CHOP(with methylprednisolone) Epirubicin 50 mg/m² (N/S 100 c.c.; 30 mins) D1 Oncovin 1.4mg/m² (max.2mg) (N/S 100 c.c.; 30 mins) D1 Endoxan 600,750 mg/m² (N/S 300 c.c.; 2 hrs) Solu-medrol 125 mg 125 mg v. D1-3 Rituximab 375 mg/m² (N/S 500 c.c.; ≥ 4 hrs) D1 or D3 or Rituximab 1400mg S.C. (Blood 2010;116:2040-2045) 2. R-CHOP (with prednisolone) Cyclophosphamide (600,750) mg/ m² + N/S 300 cc ivd 2 hrs Epirubicin 50 mg/ m² + N/S 100 cc 30 mins Vincristine 1.4 mg/ m² (max 2mg) + N/S 100 cc ivd 30 mins Prednisolone 100mg/day x 5 days Rituximab 375 mg/m² (N/S 500 c.c.; ≥ 4 hrs) D1 or D3 or Rituximab 1400mg S.C. 3.R-mini-CHOP (with methylprednisolone) Cyclophosphamide 400 mg/ m² + N/S 300 cc ivd 2 hrs Epirubicin 40 mg/ m² + N/S 100 cc 30 mins Vincristine 1 mg + N/S 100 cc ivd 30 mins Solu-medrol 125 mg ivp on D1-D3 Rituximab 375 mg/m² (N/S 500 c.c.; ≥ 4 hrs) D1 or D3 or Rituximab 1400mg S.C.

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淋巴瘤	4. R-mini-CHOP (with prednisolone) Cyclophosphamide 400 mg/ m² + N/S 300 cc ivd 2 hrs Epirubicin 40 mg/ m² + N/S 100 cc 30 mins Vincristine 1 mg + N/S 100 cc ivd 30 mins Prednisolone 100mg/day po x 5 days Rituximab 375 mg/m² (N/S 500 c.c.; ≥ 4 hrs) D1 or D3 or Rituximab 1400mg S.C. 5.R-EPOCH Etoposide 50 mg/ m² /d (N/S 500 c.c./d) C.I. 24hrs D1 ~4 Oncovin 0.4 mg/ m² /d (N/S 500 c.c./d) C.I. 24hrs D1~4 Epirubicin 14 mg/ m² /d (N/S 500 c.c./d) C.I. 24hrs D1 ~4 Solu-medrol 125 mg v. D1 ~5 (or prednisolone 60mg/ m²/d on D1-D5) Endoxan 750 mg/m² (N/S 300 c.c.; 2 hrs) D5 Rituximab 375 mg/m² (N/S 500 c.c.; ≥ 4 hrs) D1 or D6 or Rituximab 1400mg S.C. (Br J Haematol 2015;169:188-198) (J Clino Oncol 2008;26:2717-2724)

癌症類別	DLBCL
淋巴瘤	(B)2nd-line Tx 1. ESHAP +/- R { Etoposide 40 mg/ m²/d (N/S 500 c.c.; 3 hrs) D1-4 Solu-medrol 500 mg v. D1-5 Cisplatin 60 mg/m² (N/S 500 c.c.; 24 hrs) D4 or 25 mg/m²/d (N/S 500 c.c./d) C.I. D1-4 Ara-C 2 g/m² (N/S 500 c.c.; 3hrs) D5 (Rituximab 375mg/m² (N/S 500 c.c.; ≥ 4 hrs) D1 or D6) or Rituximab 1400mg S.C. (J Clini Oncol 1994;12:1169-1176) 2. ICE +/- R { Etoposide 100 mg/m² /d (N/S 500 c.c.; 3 hrs) D1-3 Ifosfamide 1.5 g/m²/d (N/S 500 c.c. C.I). × D2-4 Mesna 1.5 g/m²/d (N/S 500 c.c. C.I). × D2-4 Cisplatin 60mg/m² (N/S 500 c.c; 24hrs) D2 (Rituximab 375mg/m² (N/S 500 c.c.; ≥ 4 hrs) D1 or D6) or Rituximab 1400mg S.C. (J Clin Oncol 2010;28:4184-4190)

癌症類別	DLBCL
淋巴瘤	(C) 2nd-line (cont.) 1 .EPOCH (+ R) Etoposide 50 mg/ m2 /d (N/S 500 c.c./d) C.I. 96hrs D1 ~4 Oncovin 0.4 mg/ m2 /d (N/S 500 c.c./d) C.I. 96hrs D1 ~4 Epirubicin 14 mg/ m2 /d (N/S 500 c.c./d) C.I. 96hrs D1 ~4 Endoxan 750 mg/m2 (N/S 300 c.c.; 2 hrs) D5 Solu-medrol 125 mg v. D1 ~5(or prednisolone 60mg/ m2/d on D1-D5) Rituximab 375 mg/m2 (N/S 500 c.c.; ≥ 4 hrs) D1 or D6 or Rituximab 1400mg S.C. (J Clin Oncol 2000;18:3663-3642) 2.Tafasitamab 合併 Lenalidomide (Lancet Oncol 21(7):978-988.) ● In cycle 1 ■ Tafasitamab 12mg/kg on D1. 4. 8. 15. 22. ■ Lenalidomide 25mg po on D1-21 ● In C2-3 ■ Tafasitamab 12mg/kg on D1. 8. 15. 22. ■ Lenalidomide 25mg po on D1-21 ● In C4-12 ■ Tafasitamab 12mg/kg on D1. 15. ■ Lenalidomide 25mg po on D1-21 ● In C13- ■ Tafasitamab 12mg/kg on D1. 15

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癌症類別	DLBCL
淋巴瘤	D) 3rd-line 1. polatuzumab vedotin-Rituximab-Bendamustine (J Clin Oncol 38(2):155-165.) ● Cycle 1 ■ polatuzumab vedotin 1.8mg/kg (N/S 500 c.c.; 4 hrs) on D1 ■ Rituximab 375 mg/ m2 (N/S 500 c.c.; 4 hrs) D2 ■ Bendamustine 90 mg /m2 (N/S 100 c.c.; 1 hr) D2,3 ● Cycle 2-6 ■ polatuzumab vedotin 1.8mg/kg (N/S 500 c.c.; 4 hrs) on D1 ■ Rituximab 375 mg/ m2 (N/S 500 c.c.; 4 hrs) D1 ■ Bendamustine 90 mg /m2 (N/S 100 c.c.; 1 hr) D1,2

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癌症類別	DLBCL
淋巴瘤	D) 3rd-line (cont.) 2. Epcoritamab (J Clin Oncol 41(12):2238-2247.) ● Cycle 1: 0.16mg SC on D1, 0.8mg SC on D8. 48mg SC on D15. D21 ● Cycle 2&3: 48mg SC on D1, 8. 5, 22 ● Cycle 4-9: 48mg SC on D1. 15 ● Cycle 10-: 48mg SC on D1 3. Obinutuzumab – Glofitamab (Lancet Oncol (2016); 17(8): 1081-1093) ● Cycle 1 ■ Obinutuzumab 1000mg D1 (500ml . > 4hrs) ■ Glofitamab 2.5mg D8 (250ml, >4 hrs); 10mg D10 (500ml., > 4hrs) ● Cycle 2-12 ■ Glofitamab 30mg D1 (500ml; >4hrs)

癌症類別	Burkitt's Lymphoma
淋巴瘤	Low-risk (1) CODOX-M(may add I.T. in each cycle) { Endoxan 1200 mg/ m² (N/S 500 c.c.; 6 hrs) D1 Oncovin 1.4 mg/m² (max.2mg) (N/S 100 c.c.; 30 mins) D1 Epirubicin 50 mg/m² (N/S 100 c.c.; 30 mins) D1 High-dose MTX 300 mg/m² (500 c.c.; 6hrs) → D10 60 mg/m² (N/S 100 c.c.; 1 hr) 38hrs later, 60 mg/m² I.V. 1hr D11 Solu-medrol 125 mg v. D1-2 Rituximab(optioal) 375mg/m² (N/S 500 c.c.; ≥ 4 hrs) D1 or D3 or Rituximab 1400mg S.C. May be considered I.T. MTX (A) 12mg D10, cycle 1-6 (B)12.5mg D3, cycle 2-3 (Cancer 2003;98:1196-1205) (2) Hyper CVAD A ↔ B q4wks(may add I.T. in each cycle) (A) Epirubicin 50 mg/m² + N/S 100 cc ivd 30 mins on D4 Vincristine 1.4 mg/m² (max 2mg) + N/S 100 cc ivd 30 mins on D4 Cyclophosphamide 300 mg/m² + N/S 300 cc ivd 2 hrs q12h on D1-D3 (6 doses) Mesna 600 mg/m²+ N/S 500 cc ivd 24 hrs on D1-D3 Vincristine 1.4 mg/m² (max 2mg) + N/S 100 cc ivd 30 mins on D11 Dexamethasone 40 mg p.o. or v. D1-4 & D11-14 (B) MTX 200 mg/m² (N/S 500 c.c.; 3hrs) MTX 800 mg/m² (N/S 500 c.c.; 24 hrs) D1 Leucovorin 15mg gid × 10 days Ara-C 3000mg/m² (N/S 500 c.c.; 3hrs) q12h × 4 doses D2,3 (Cancer 2006;106:1569-1580) (3)I.T. MTX (A) 12mg on D2 Cytarabine 100mg on D8

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癌症類別	Burkitt's Lymphoma
淋巴癌	(3)EPOCH(+R) { Etoposide 50 mg/ m² /d (N/S 500 c.c./d) C.I. 96 hrs D1 ~4 Oncovin 0.4 mg/ m² /d (N/S 500 c.c./d) C.I. 96 hrs D1 ~4 Epirubicin 14 mg/ m² /d (N/S 500 c.c./d) C.I. 96 hrs D1 ~4 or 40 mg/ m² (N/S 100 c.c.; 30 mins) D1 Solu-medrol 125 mg v. D1 ~5(or prednisolone 60mg/ m²/d on D1-D5) Endoxan 750 mg/m² (N/S 300 c.c.; 2 hrs) D5 (Rituximab 375mg/m² (N/S 500 c.c.; ≥ 4 hrs) D1 or D6) or Rituximab 1400mg S.C. May be considered I.T. MTX 12 mg D2; Ara-C 100 mg D8 (Cancer 2012; 118:3977-3983)

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癌症類別	Burkitt's Lymphoma
淋巴瘤	High-risk 1.Hyper CVAD A ↔ B (A) { Epirubicin 50 mg/m² + N/S 100 cc ivd 30 mins on D4 Vincristine 1.4 mg/m² (max 2mg) + N/S 100 cc ivd 30 mins on D4 Cyclophosphamide 300 mg/m² + N/S 300 cc ivd 2 hrs q12h on D1-D3 (6 doses) Mesna 600 mg/m²+ N/S 500 cc ivd 24 hrs on D1-D3 Vincristine 1.4 mg/m² (max 2mg) + N/S 100 cc ivd 30 mins on D11 Dexamethasone 40 mg p.o. or v. D1-4 & D11-14 (B) { MTX 200 mg/m² (N/S 500 c.c.; 3hrs) MTX 800 mg/m² (N/S 500 c.c.; 24 hrs) D1 Leucovorin 15mg gid × 10 days Ara-C 3000mg/m² (N/S 500 c.c.; 3hrs) q12h × 4 doses D2,3 (Cancer 2006;106:1569-1580) May be considered I.T. MTX 12 mg D2; Ara-C 100 mg D8 (Cancer 2006;106:1569-1580)
淋巴瘤	2.EPOCH (for poor performance) { Etoposide 50 mg/ m² /d (N/S 500 c.c./d) C.I. 24 hrs D1 ~4 Oncovin 0.4 mg/ m² /d (N/S 500 c.c./d) C.I. 24 hrs D1 ~4 Epirubicin 14 mg/ m² /d (N/S 500 c.c./d) C.I. 24 hrs D1 ~4 Solu-medrol 125 mg v. D1 ~5(or prednisolone 60mg/ m²/d on D1-D5) Endoxan 750 mg/m² (N/S 300 c.c.; 2 hrs) D5 (Rituximab 375mg/m² (N/S 500 c.c.; ≥ 4 hrs) D1 or D6) or Rituximab 1400mg S.C. (Cancer 2012; 118:3977-3983)