

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：115.02

癌症類別	HD
淋巴癌	<p>(A) Classical type</p> <p>(I) Stage \leq II</p> <p>ABVD 3-6 cycles (\pm R/T)</p> <ul style="list-style-type: none"> 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 <p>(N Engl J Med 2010;363:640-652)</p>

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淋 巴 癌	<p>(A) Classical type (II) Stage III~IV 1.ABVD 6 cycles</p> <table border="0" style="width: 100%;"> <tr> <td style="font-size: 3em; vertical-align: middle;">{</td> <td>Epirubicin 30 mg/m² (N/S 100 c.c.; 30 mins) D1,15</td> </tr> <tr> <td></td> <td>Bleomycin 8 mg/m² (N/S 100 c.c.; 30 mins) D1,15</td> </tr> <tr> <td></td> <td>Oncovin 1.4 mg/m²(max 2mg) (N/S 100 c.c.; 30 mins) D1,15</td> </tr> <tr> <td></td> <td>Dacarbazine 375 mg/m² (N/S 500 c.c.; 4 hrs) D1,15</td> </tr> </table> <p>(J Clin Oncol 2010;28:4199-4206)</p> <p>(III) Stage IV(IPS Score:4-7 分；CD30+；treatment naïve)</p> <p>1. <u>BV-AVD，Q4wk*6 cycles</u></p> <table border="0" style="width: 100%;"> <tr> <td><u>Brentuximab vedotin</u></td> <td><u>1.2mg/kg (N/S 100 c.c.; 30 mins)</u></td> <td><u>D1,15</u></td> </tr> <tr> <td><u>Epirubicin</u></td> <td><u>30mg/ m2 (N/S 100 c.c.; 30 mins)</u></td> <td><u>D1,15</u></td> </tr> <tr> <td><u>Oncovin</u></td> <td><u>1.4 mg/m2(max 2mg) (N/S 100 c.c.; 30 mins)</u></td> <td><u>D1,15</u></td> </tr> <tr> <td><u>Dacarbazine</u></td> <td><u>375 mg/m2 (N/S 500 c.c.; 4 hrs)</u></td> <td><u>D1,15</u></td> </tr> </table> <p>(NEJM 2018；378:331-344)</p>	{	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	<u>Brentuximab vedotin</u>	<u>1.2mg/kg (N/S 100 c.c.; 30 mins)</u>	<u>D1,15</u>	<u>Epirubicin</u>	<u>30mg/ m2 (N/S 100 c.c.; 30 mins)</u>	<u>D1,15</u>	<u>Oncovin</u>	<u>1.4 mg/m2(max 2mg) (N/S 100 c.c.; 30 mins)</u>	<u>D1,15</u>	<u>Dacarbazine</u>	<u>375 mg/m2 (N/S 500 c.c.; 4 hrs)</u>	<u>D1,15</u>
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淋巴瘤	<p>(B) Lymphocyte-predominant type</p> <p>1. ABVD+ (*Rituximab) 6-8 cycles</p> <ul style="list-style-type: none"> 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. <p>(Blood 2011;118:4585-4590)(Blood 2013; 122:4182-4188)</p> <p>2. CHOP+ (* Rituximab)</p> <ul style="list-style-type: none"> 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. <p>(ASH Annual Meeting Abstract 2010;106:2812) (Blood 2013; 122:4182-4188)</p>

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淋巴瘤	<p>3. .EPOCH+ (*Rituximab)</p> <ul style="list-style-type: none">Etoposide 50 mg/ m²/d (N/S 500 c.c./d) C.I. 24hrs D1 ~4Oncovin 0.4 mg/ m²/d (N/S 500 c.c./d) C.I. 24hrs D1 ~4Epirubicin 14 mg/ m²/d (N/S 500 c.c./d) C.I. 24hrs D1 ~4Solu-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) <p>4. *Rituximab 375 mg/m² (N/S 500 c.c.; ≥ 4 hrs) or *Rituximab 1400mg S.C.</p>

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癌症類別	SLL/CLL
淋巴瘤	<p>(I) First-line</p> <ol style="list-style-type: none"> 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. <u>Obinutuzuma+chlorambucil (申請條件依健保給付規定) (N Engl J Med 2014;370(12):1101-1110)</u> <ul style="list-style-type: none"> ● In cycle 1 <ul style="list-style-type: none"> ● 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 <ul style="list-style-type: none"> ● 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	<p>(I) First-line (Conti.)</p> <p>5. CVP</p> <ul style="list-style-type: none"> ● 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) <p>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)</p> <p>7. Monotherapy: Bendamustine 100 mg/ m² D1,D2 q 28 days * 6 cycles</p> <p>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)</p>

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淋巴癌	<p>(I) First-line (Cont.)</p> <p>9. FCR</p> <p>{ 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)</p> <p>10. FR (Fludarabine、Rituximab)</p> <p>{ 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)</p> <p>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></p> <ul style="list-style-type: none"> ● Ibrutinib 560mg po QD (blood adv. 2022;6:3440-3450) ● Acalabrutinib 100mg po BID (J Clin Oncol2021; 39:344-3452) ● Zanubrutinib 160mg po BID or 320mg po QD (Lancet Oncol 2022;23:1031-1043)

癌症 類別	SLL/CLL)
淋 巴 癌	<p>(II) 2nd-line Tx (if not use in first-line)</p> <ol style="list-style-type: none"> 1. Fludarabine 25 mg/m²/d (N/S 100 c.c.; 1 hr) D1-5 2. FC <ul style="list-style-type: none"> { 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 <ul style="list-style-type: none"> { 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 <ul style="list-style-type: none"> { 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

癌症類別	SLL/CLL
淋巴癌	<p>(II) 2nd-line Tx (cont.)</p> <p>6. FCR</p> <p>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)</p> <p>7. R-CHOP(with methylprednisolone)</p> <p>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)</p> <p>8. R-CHOP (with prednisolone)</p> <p>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.</p>

癌症類別	SLL/CLL
淋巴癌	<p>(II) 2nd-line Tx (cont.)</p> <p>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.</p> <p>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.</p> <p>11. Bendamustine 100mg/ m2 D1,D2 (monotherapy)</p> <p>12. Bendamustine 90mg/ m2 D1,D2 Rituximab 375mg/ m2 or 1400mg S.C. , D1 , D2</p> <p>13. venetoclax (17p 缺失): titrate as protocol, max 400mg po QD). (J Adv. Pract. Oncol 2017; 38(6): 647-652)</p> <p>14. Acalabrutinib (非 IGHV 突變): 100mg po BID (J Clin Oncol2021; 39:344-3452)</p> <p>15. Zanubrutinib (非 IGHV 突變): 160mg po BID or 320mg po QD (Lancet Oncol 2022;23:1031-1043)</p> <p>(III) 3rd-line Tx</p> <p>1. Acalabrutinib (二線以上治療惡化):100mg po BID (J Clin Oncol2021; 39:344-3452)</p> <p>2. Zanubrutinib (非 IGHV 突變): 160mg po BID or 320mg po QD (Lancet Oncol 2022;23:1031-1043)</p>

癌症類別	Follicular Lymphoma(classic FL , gr1 , 2 , 3A ; gr3B as DLBCL)
淋巴癌	<p>(A) 1st-line Tx</p> <p>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)</p> <p>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.</p> <p>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.</p>

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 癌	<p>(A) 1st-line Tx</p> <p>1.COP</p> <ul style="list-style-type: none"> 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 <p>2.CHOP</p> <ul style="list-style-type: none"> 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 <p>*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)</p> <p>3. Hyper CVAD A ↔ B q4wks</p> <p>(A) Epirubicin 50 mg/m² + N/S 100 cc ivd 30 mins on D4</p> <ul style="list-style-type: none"> 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

癌症類別	Mantle cell lymphoma
淋 巴 癌	<p>(B)</p> <ul style="list-style-type: none"> 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) <p>4. Bendamustine 90mg/m² D1 , D2 Rituximab 375mg/m² or 1400mg S.C. D1 or D3 (Stage III~IV 不適合移植)</p> <p>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/S500ml;3 hrs) D1</p> <p>(B) 2-line Tx</p> <p>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)</p>

癌症類別	Mantle cell lymphoma
淋 巴 癌	<p>2. R-EPOCH</p> <ul style="list-style-type: none"> 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) <p>3. R- ESHAP</p> <ul style="list-style-type: none"> 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) <p>4. Acalabrutinib 150m po BID (Leukemia 2019; 33:2762-2766)</p> <p>5. Zanubrutinib 160mg po BID or 320mg po QD (Blood Adv. 2021;5:2577-2585)</p> <p>6. Bortezomib-base C/T(一線未使用)</p> <p>7. Ibrutinib 560mg po QD (Blood 2015; 126:739-745)</p>

癌症類別	DLBCL
淋巴瘤	<p>(A) 1st-line Tx</p> <p>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)</p> <p>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.</p> <p>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.</p>

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癌症類別	DLBCL
淋巴癌	<p>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.</p> <p>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. (Br J Haematol 2015;169:188-198) (J Clino Oncol 2008;26:2717-2724)</p>

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癌症類別	DLBCL
淋巴癌	<p>(B)2nd-line Tx</p> <p>1. ESHAP +/- R</p> <p>{ 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)</p> <p>2. ICE +/- R</p> <p>{ 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)</p>

癌症類別	DLBCL
淋巴瘤	<p>(C) 2nd-line (cont.)</p> <p>1 .EPOCH (+ R)</p> <p>Etoposide 50 mg/ m2 /d (N/S 500 c.c./d) C.I. 96hrs D1 ~4</p> <p>Oncovin 0.4 mg/ m2 /d (N/S 500 c.c./d) C.I. 96hrs D1 ~4</p> <p>Epirubicin 14 mg/ m2 /d (N/S 500 c.c./d) C.I. 96hrs D1 ~4</p> <p>Endoxan 750 mg/m2 (N/S 300 c.c.; 2 hrs) D5</p> <p>Solu-medrol 125 mg v. D1 ~5(or prednisolone 60mg/ m2/d on D1-D5)</p> <p>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)</p> <p>2. Tafasitamab 合併 Lenalidomide (Lancet Oncol 21(7):978-988.</p> <ul style="list-style-type: none"> ● In cycle 1 <ul style="list-style-type: none"> ■ Tafasitamab 12mg/kg on D1. 4. 8. 15. 22. ■ Lenalidomide 25mg po on D1-21 ● In C2-3 <ul style="list-style-type: none"> ■ Tafasitamab 12mg/kg on D1. 8. 15. 22. ■ Lenalidomide 25mg po on D1-21 ● In C4-12 <ul style="list-style-type: none"> ■ Tafasitamab 12mg/kg on D1. 15. ■ Lenalidomide 25mg po on D1-21 ● In C13- <ul style="list-style-type: none"> ■ Tafasitamab 12mg/kg on D1. 15

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癌症類別	DLBCL
淋巴癌	<p>D) 3rd-line</p> <ol style="list-style-type: none">1. polatumab vedotin-Rituximab-Bendamustine (J Clin Oncol 38(2):155-165.)<ul style="list-style-type: none">● Cycle 1<ul style="list-style-type: none">■ polatumab 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<ul style="list-style-type: none">■ polatumab 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
淋巴癌	<p>D) 3rd-line (cont.)</p> <p>2. Epcoritamab (J Clin Oncol 41(12):2238-2247.)</p> <ul style="list-style-type: none">● 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● <p>3. Obinutuzumab – Glofitamab (. Lancet Oncol (2016); 17(8): 1081-1093</p> <ul style="list-style-type: none">● Cycle 1<ul style="list-style-type: none">■ Obinutuzumab 1000mg D1 (500ml . > 4hrs)■ Glofitamab 2.5mg D8 (250ml, >4 hrs); 10mg D10 (500ml., > 4hrs)● Cycle 2-12<ul style="list-style-type: none">■ Glofitamab 30mg D1 (500ml; >4hrs)

癌症類別	Burkitt's Lymphoma
淋巴癌	<p>Low-risk</p> <p>(1) CODOX-M(may add I.T. in each cycle)</p> <ul style="list-style-type: none"> 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) <p>(2) Hyper CVAD A ↔ B q4wks(may add I.T. in each cycle)</p> <p>(A)</p> <ul style="list-style-type: none"> 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 <p>(B)</p> <ul style="list-style-type: none"> 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) <p>(3) I.T.</p> <ul style="list-style-type: none"> MTX (A) 12mg on D2 Cytarabine 100mg on D8

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癌症類別	Burkitt's Lymphoma
淋巴癌	<p>(3)EPOCH(+R)</p> <ul style="list-style-type: none"> 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 <li style="padding-left: 20px;">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	<p>High-risk</p> <p>1.Hyper CVAD A ↔ B</p> <p>(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</p> <p>(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)</p>
淋巴瘤	<p>2.EPOCH (for poor performance)</p> <p>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)</p>