

癌症類別	胃癌
CCRT	<p>(1) Cisplatin 60 mg/m² (N/S 500 c.c.; ≥ 4hrs) + Epirubicin 50mg/m² (N/S 100 c.c. 30 mins) + 5-FU 1500 mg/m² (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/m² + 5-FU 1000 mg/m² (N/S 500 c.c.; ≥ 4 hrs) + Leucovorin 100 m (N/S 500 c.c.; ≥ 4 hrs) (B) Epirubicin 50mg/m² + 5-FU 1000 mg/m² + Leucovorin 100 mg/m²</p> <p>(2) Cisplatin 60 mg/m² + 5-FU 2000 mg/m² (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/m² (N/S 500 c.c.; ≥ 4hrs) + Epirubicin 50mg/m² (N/S 100 c.c. 30 mins) + 5-FU 1500 mg/m² (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/m² + 5-FU 1000 mg/m² (N/S 500 c.c.; ≥ 4 hrs) + Leucovorin 100 m (N/S 500 c.c.; ≥ 4 hrs) (B) Epirubicin 50mg/m² + 5-FU 1000 mg/m² + Leucovorin 100 mg/m²</p> <p>(2) Cisplatin 60 mg/m² + 5-FU 2000 mg/m² (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/m² (D5W 500 c.c.; ≥ 3 hrs) q2wks + Capecitabine 1250-1500 mg/m²/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/ m² (N/S 100 c.c.; 1hr) q 4wks or 35,40 mg/m² (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/m²/d + Leucovorin 30 mg/d] or [Capecitabine 1250-1500 mg/m²/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>

Immunotherapy: PD-1, PD-L1 抑制劑 (如 atezolizumab、nivolumab、Pembrolizumab、ipilimumab； durvalumab； tremelimumab)健保條例

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Adjuvant	<p>For stage \geq IB~IIA , only :</p> <p>(1) Cisplatin 60 mg/m² (N/S 500 c.c.; \geq 4hrs) + Epirubicin 50mg/m² (N/S 100 c.c. 30 mins) + 5-FU 1500 mg/m² (N/S 500 c.c.; \geq 4hrs) + Leucovorin 200 m (N/S 500 c.c.; \geq 4hrs) q4wks VI (Proc. ASCO 1995; 14:197) or (A) \leftrightarrow (B) q2wks VI { (A) Cisplatin 60 mg/m² + 5-FU 1000 mg/m² (N/S 500 c.c.; \geq 4 hrs) + Leucovorin 100 m (N/S 500 c.c.; \geq 4 hrs) (B) Epirubicin 50mg/m² + 5-FU 1000 mg/m² + Leucovorin 100 mg/m²</p> <p>(2) Cisplatin 60 mg/m² + 5-FU 2000 mg/m² (N/S 500 c.c.; \geq 4hrs) + Leucovorin 200 mg (N/S 500 c.c.; \geq 4hrs) VI (Hepatogastroenterology 45(25), 594-600 Jan-Feb 1999)</p> <p>For stage \geq IIB~IIIC (E-G junction adenocarcinoma \geq IIB included) , only :</p> <p>(1) Cisplatin 60 mg/m² (N/S 500 c.c.; \geq 4hrs) + Epirubicin 50mg/m² (N/S 100 c.c. 30 mins) + 5-FU 1500 mg/m² (N/S 500 c.c.; \geq 4hrs) + Leucovorin 200 m (N/S 500 c.c.; \geq 4hrs) q4wks VI (Proc. ASCO 1995; 14:197) or (A) \leftrightarrow (B) q2wks VI { (A) Cisplatin 60 mg/m² + 5-FU 1000 mg/m² (N/S 500 c.c.; \geq 4 hrs) + Leucovorin 100 m (N/S 500 c.c.; \geq 4 hrs) (B) Epirubicin 50mg/m² + 5-FU 1000 mg/m² + Leucovorin 100 mg/m²</p> <p>(2) Cisplatin 60 mg/m² + 5-FU 2000 mg/m² (N/S 500 c.c.; \geq 4hrs) + Leucovorin 200 mg (N/S 500 c.c.; \geq 4hrs) VI (Hepatogastroenterology 45(25), 594-600 Jan-Feb 1999)</p> <p>(3) Oxaliplatin 85 mg/m² (D5W 500 c.c.; \geq 3 hrs) q2wks + Capecitabine 1250-1500 mg/m²/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/m² (N/S 100 c.c.; 1hr) q 4wks or 35,40 mg/m² (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 \geq 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 \geq IIB included)</p> <p>(6) Tegafur & Gimeracil & Oteracil TS-1(2:1) : 1-yr adjuvant only for stage II、IIIA、IIIB BSA : < 1.25 m² : 40 mg bid ; BSA : 1.25-1.5 m² : 50 mg bid ; BSA : \geq 1.5 m² : 60 mg bid ; (JCO, May 2009 4511-4511)</p> <p>© [UFUR 900-1100 mg/m²/d + Leucovorin 30 mg/d] or [Capecitabine 1250-1500 mg/m²/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>

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Palliative	<p>(1) Cisplatin 60 mg/m² (N/S 500 c.c.; ≥ 4hrs) + Epirubicin 50mg/m² (N/S 100 c.c. 30 mins) + 5-FU 1500 mg/m² (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/m² + 5-FU 1000 mg/m² (N/S 500 c.c.; ≥ 4 hrs) + Leucovorin 100 mg (N/S 500 c.c.; ≥ 4 hrs) (B) Epirubicin 50mg/m² + 5-FU 1000 mg/m² + Leucovorin 100 mg/m²</p> <p>(2) Cisplatin 60 mg/m² + 5-FU 2000 mg/m² (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/m² (D5W 500 c.c.; ≥ 3 hrs) q2wks + Capecitabine 1250-1500 mg/m²/d. (2:1 or 5:2) or 5-FU or UFUR (Br J Cancer 2006 Apr 10;94(7): 959-963)</p> <p>(4) Docetaxel 60,75mg/ m² (N/S 100 c.c.; 1hr) q 4wks or 35,40 mg/m² (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/m² (N/S 500 c.c.; 3 hrs) q4wks (or 85 mg/m² (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 or v. 5-FU/LV</p> <p>(8) Nivolumab 240mg + Oxaliplatin +5-FU or Capecitabine (+ Taxotere in E-G J)</p> <p>(9) Trastuzumab (Herceptin)(限 I.V.) + Cisplatin 60 mg/m² + 5-FU 2000 mg/m² + Leucovorin 100 mg or Capecitabine 1250-1500 mg/m²/d (2:1 or 5:2)(+ Taxotere in E-G J)</p> <p>(10) Lonsurf 35mg/m² BID on D1-D5 , D8-D12 q 4 wks/cycle</p> <p>◎ [UFUR 900-1100 mg/m²/d + Leucovorin 30 mg/d] or [Capecitabine 1250-1500 mg/m²/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> <p>◎亦可考慮下列藥物： * MMC 8mg / m² (N/S 100 c.c.; 30 mins) q 4 wks (Br J Cancer 2002 Jan21; 86(2):213-217) * Irinotecan 140,150,160 mg/ m² (N/S 500 c.c.; 3 hrs) q2 wks (Oncology Dec. 1, 2000) * Pemetrexed 500mg/ m² (N/S 100 c.c.; 20 mins) q 4wks (Clinical Cancer Research Jun 2004 Vol.10 Issue12)</p>