天主教聖馬爾定醫院

食道癌化療處方集

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癌別：食道癌	
CCRT	(1) Cisplatin 30mg/m^2 (N/S 500 c.c.; ≥ 3hrs) + 5-FU 600 mg/m^2 (N/S 500 c.c.; ≥ 3hrs) + Leucovorin 100 mg (N/S 500 c.c.; ≥ 3hrs) / wk (during R/T treatment) (2) (A)<—> (B) q 2 wks (A) Cisplatin 60 mg/m^2 (N/S 500 c.c.; ≥ 4hrs) + MTX 200 mg/m^2 (N/S 500 c.c.; ≥3hrs)(or 100 mg/m^2 (N/S 100 c.c.; 1 hr) for poor P.S.)(Cancer 1989;64-371-373) (B) Epirubicin 50 mg/m^2 (N/S 100 c.c.;30 mins)+ Bleomycin 8 mg/m^2 (N/S 100 c.c.; 30 mins) + 5-FU 1500 mg/m^2 (N/S 500 c.c.; ≥ 4hrs) + Leucovorin 200 mg (N/S 500 c.c.; ≥ 4hrs)(Gastrointestinal Cancer Research 2008 Mar-Apr.; 2(2):85-92)
Neoadjuvant(術前)	(1) Cisplatin 60 mg/m^2 (N/S 500 c.c.; ≥ 4hrs) + 5-FU 2000 mg/m^2 (N/S 500 c.c.; ≥ 4hrs) + Leucovorin 200 mg (N/S 500 c.c.; ≥ 4hrs) q 4 wks (European Journal of Cancer Vol.33 July 1997 pp.1216-1220) or Cisplatin 60 mg/m^2 (N/S 500 c.c.; ≥ 4hrs) + [5-FU 1000 mg/m^2 (N/S 500 c.c.; ≥ 4hrs) + Leucovorin 100 mg (N/S 500 c.c.; ≥ 4hrs)] * II q 4 wks (2) (A)<—> (B) q 2 wks (A) Cisplatin 60 mg/m^2 + MTX 200 mg/m^2 (N/S 500 c.c.; ≥3hrs)(or 100 mg/m^2 (N/S 100 c.c.; 1 hr) for poor P.S.) (Cancer 1989;64-371-373) (B) Epirubicin 50 mg/m^2 (N/S 100 c.c.;30 mins)+ Bleomycin 8 mg/m^2 (N/S 100 c.c.; 30 mins)+ 5-FU 1500 mg/m^2 (N/S 500 c.c.; ≥ 4hrs) + Leucovorin 200 mg (N/S 500 c.c.; ≥ 4hrs)(Gastrointestinal Cancer Research 2008 Mar-Apr.; 2(2):85-92) (3) Docetaxel 60,75mg/ m^2 (N/S 100 c.c.; 1hr)/ 4wks or 35,40 mg/m^2 (N/S 100 c.c.; 1hr)/ 2 wks (only for

	E-G junction adenocarcinoma, ≥ stage IIB) (JCO, Nov. 2006 4991-4997) (4) Cisplatin(劑量同上)+ Docetaxel(劑量同上) (108/1/1 健保條例 9.3for E-G junction adenocarcinoma, ≥ stage IIB)
Adjuvant(術後)	(1) Cisplatin 60 mg/m^2 (N/S 500 c.c.; ≥ 4hrs) + 5-FU 2000 mg/m^2 (N/S 500 c.c.; ≥ 4hrs) + Leucovorin 200 mg (N/S 500 c.c.; ≥ 4hrs) q 4 wks *6 cycles (European Journal of Cancer Vol.33 July 1997 pp.1216-1220) or Cisplatin 60 mg/m^2 (N/S 500 c.c.; ≥ 4hrs) + [5-FU 1000 mg/m^2 (N/S 500 c.c.; ≥ 4hrs) + Leucovorin 100 mg (N/S 500 c.c.; ≥ 4hrs)] * II q 4 wks (2) (A)<—> (B) q 2 wks *6 cycles (A) Cisplatin 60 mg/m^2 + MTX 200 mg/m^2 (N/S 500 c.c.; ≥3hrs) (or 100 mg/m^2 (N/S 100 c.c.; 1 hr) for poor P.S.) (Cancer 1989;64-371-373) (B) Epirubicin 50 mg/m^2 (N/S 100 c.c.;30 mins)+ Bleomycin 8 mg/m^2 (N/S 100 c.c.; 30 mins)+ 5-FU 1500 mg/m^2 (N/S 500 c.c.; ≥ 4hrs) + Leucovorin 200 mg (N/S 500 c.c.; ≥ 4hrs) (Gastrointestinal Cancer Research 2008 Mar-Apr.; 2(2):85-92) (3) Docetaxel 60,75mg/ m^2 (N/S 100 c.c.; 1hr)/ 4wks or 35,40 mg/m^2 (N/S 100 c.c.; 1hr)/ 2 wks *6 cycles (only for E-G junction adenocarcinoma, ≥ stage IIB) (JCO, Nov. 2006 4991-4997) (4) Cisplatin(劑量同上)+ Docetaxel(劑量同上) *6 cycles (108/1/1 健保條例 9.3:for E-G junction adenocarcinoma, ≥ stage IIB)
Palliative(無法手術)	(1) Cisplatin 60 mg/m^2 (N/S 500 c.c.; ≥ 4hrs) + 5-FU 2000 mg/m^2 (N/S 500 c.c.; ≥ 4hrs) + Leucovorin 200 mg (N/S 500 c.c.; ≥ 4hrs) q 4 wks (European Journal of Cancer Vol.33 July 1997 pp.1216-1220) or Cisplatin 60 mg/m^2 (N/S 500 c.c.; ≥ 4hrs) + [5-FU 1000 mg/m^2 (N/S 500 c.c.; ≥ 4hrs) + Leucovorin 100 mg (N/S 500 c.c.; ≥ 4hrs)] * II q 4 wks (2) (A)<—> (B) q 2 wks (A) Cisplatin 60 mg/m^2 + MTX 200 mg/m^2 (N/S 500 c.c.; ≥3hrs)(or 100 mg/m^2 (N/S 100 c.c.; 1 hr) for poor P.S.) (Cancer 1989;64-371-373) (B) Epirubicin 50 mg/m^2 (N/S 100 c.c.;30 mins)+ Bleomycin 8 mg/m^2 (N/S 100 c.c.; 30 mins)+ 5-FU 1500 mg/m^2 (N/S 500 c.c.; ≥ 4hrs) + Leucovorin 200 mg (N/S 500 c.c.; ≥ 4hrs) (Gastrointestinal Cancer Research 2008 Mar-Apr.; 2(2):85-92) (3) Docetaxel 60,75mg/ m^2 (N/S 100 c.c.; 1hr)/ 4wks or 35,40 mg/m^2 (N/S 100 c.c.; 1hr)/ 2 wks (only for

	E-G junction adenocarcinoma, ≥ stage IIB) (JCO, Nov. 2006 4991-4997) (4) Cisplatin(劑量同上)+ Docetaxel(劑量同上) (108/1/1 健保條例 9.3for E-G junction adenocarcinoma, ≥ stage IIB) (5) Nivolumab 240mg(in N/S 100ml, ivd 60mins) q2wk x 2yr. (6) Oxaliplatin 85mg/ m^2(D5W 500 c.c.; ≥ 3hrs) q2wk+ Nivolumab 240mg(in N/S 100ml, ivd 60mins)+ 5-FU 1500 mg/m^2 (N/S 500 c.c.; ≥ 4hrs) + Leucovorin 200 mg (N/S 500 c.c.; ≥ 4hrs)
May consider : *MMC 8 mg / m^2 /cycle (Oncology 1993 Apr;50 Supp1 1:53-60) * Irinotecan 140,150,160 mg / m^2 / 2 wks (Oncology Dec.3 2000) *Cetuximab 250 mg / m^2 /dose (The Oncologist July 25,2005)	

Immunotherapy: PD-1, PD-L1 抑制劑 (如 atezolizumab、nivolumab、Pembrolizumab、avelumab)(109/11/01 健保條例 9.69)