MESOTHELIOMA TREATMENT REGIMENS

Clinical Trials: The NCCN recommends cancer patient participation in clinical trials as the gold standard for treatment.

Cancer therapy selection, dosing, administration, and the management of related adverse events can be a complex process that should be handled by an experienced healthcare team. Clinicians must choose and verify treatment options based on the individual patient; drug dose modifications and supportive care interventions should be administered accordingly. The cancer treatment regimens below may include both U.S. Food and Drug Administration-approved and unapproved indications/regimens. These regimens are provided only to supplement the latest treatment strategies.

These Guidelines are a work in progress that may be refined as often as new significant data becomes available. The NCCN Guidelines® are a consensus statement of its authors regarding their views of currently accepted approaches to treatment. Any clinician seeking to apply or consult any NCCN Guidelines® is expected to use independent medical judgment in the context of individual clinical circumstances to determine any patient's care or treatment. The National Comprehensive Cancer Network makes no warranties of any kind whatsoever regarding their content, use, or application and disclaims any responsibility for their application or use in any way.

First-line Chemotherapy¹

Note: All recommendations are Category 2A unless otherwise indicated.

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REGIMEN	DOSING
Pemetrexed + cisplatin (Category 1) ²	Day 1: Pemetrexed 500mg/m^2 IV day 1 followed 30 minutes later by cisplatin 75mg/m^2 over 2 hours. Repeat every 21 days up to 12 cycles.
Pemetrexed + carboplatin ³⁻⁵	Day 1: Pemetrexed 500mg/m² IV and carboplatin AUC 5mg·min/mL IV. Repeat every 21 days for a max of 9 cycles.
Gemcitabine + cisplatin ^{6,7}	Day 1: Cisplatin 80–100mg/m² IV over 1 hour Days 1, 8, and 15: Gemcitabine 1000–1250mg/m² IV over 30 minutes. Repeat every 21-28 days for 6 cycles.
Pemetrexed ⁸	Day 1: Pemetrexed 500mg/m² IV. Repeat every 21 days for 4 cycles.
Vinorelbine ⁹	Vinorelbine 25-30mg/m² (max 60mg) IV every week for 12 weeks.
Pemetrexed + cisplatin + bevacizumab ^{10a}	Day 1: Pemetrexed 500mg/m² IV + cisplatin 75mg/m² IV + bevacizumab 15mg/kg IV. Repeat every 21 days for 6 cycles, followed by: Maintenance bevacizumab 15mg/kg every 21 days until disease progression.
Second-line Chemotherapy ¹	
Pemetrexed (if not administered as first-line) (Category 1) ^{11,12b}	Day 1: Pemetrexed 500mg/m² IV. Repeat every 3 weeks for 8 cycles.
Vinorelbine ^{13,14}	Vinorelbine 30mg/m² (max 60mg) IV weekly. Repeat every 6 weeks for 11 cycles.
Gemcitabine ¹⁴⁻¹⁶	Days 1, 8, and 15: Gemcitabine 1250mg/m² IV. Repeat every 28 days for a max of 10 cycles.

- a The combination regimen of pemetrexed + cisplatin + bevacizumab is only for unresectable disease.
- b Consider rechallenge if good sustained response at the time initial chemotherapy was interrupted.

References

- Referenced with permission from the NCCN Clinical Practice Guidelines in Oncology (NCCNGuidelines®) for Malignant Pleural Mesothelioma. V3.2016. Available at: http://www. nccn.org. Accessed September 9, 2016.
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