Regimen	Indication ■ Adjuvant chemotherapy in high risk	Drugs\HRG					
		Day(s)	Drug	Dose	Route	Comments	
Docetaxel (version 1.0)	patients following 4 cycles of EC90 or Epirubicin	1	Docetaxel	100mg/m ²	IV	Infusion in 250mL Sodium Chloride 0.9% over 1 hour	
		Туре	Days	HRG			
		Procurement	1	Formulary			
		Delivery	1	Day Case			
		is permissible				acycline regimen, reverse sequencing	
CMF (1 + 8)	Neo-Adjuvant therapy for standard risk The standard following A system of the standard risk	Day(s)	Drug	Dose	Route	Comments	
(version 1.0)	patients following 4 cycles of the "Epirubicin (NEAT/McNEAT Schedule)"	1 + 8	Cyclophosphamide	600mg/m ²	IV	Bolus via fast running drip of Sodium Chloride 0.9%	
	regimen.	1 + 8	Methotrexate	50mg/m ²	IV	Bolus via fast running drip of Sodium Chloride 0.9%	
		1 + 8	5-Fluorouracil	600mg/m ²	IV	Bolus via fast running drip of Sodium Chloride 0.9%	
		Туре	Days	HRG			
		Procurement	1 & 8	Cost & Volume			
		Delivery	1 & 8	Day Case			

Regimen	Indication			Drugs'	HRG	
	Adjuvant chemotherapy in standard ris	Day(s)	Drug	Dose	Route	Comments
EC90 version 1.0)	patients.	1	Epirubicin	90mg/m²	IV	Bolus via fast running drip of Sodium Chloride 0.9%
	Adjuvant chemotherapy in high risk patients followed by 4 cycles of the "Docetaxel" regimen or 12 cycles of the "Paclitaxel - weekly" regimen.	1	Cyclophosphamide	600mg/m²	IV	Bolus via fast running drip of Sodium Chloride 0.9%
	r dollaxer weekly regimen.	Туре	Days	HRG		
		Procurement	1	Cost & Volume		
		Delivery	1	Day Case		
		Adjuvant cycles of	·	ays for 4 cycles fo ly" regimen	•	cycles of the "Docetaxel" regimen o
		Adjuvant cycles ofAdjuvant s	high risk – every 21 da the "Paclitaxel – Week standard risk – every 2	ays for 4 cycles fo ly" regimen 21 days for up to 6	6 cycles	cycles of the "Docetaxel" regimen or
- - -	Neo-adjuvant therapy for standard or hericle petiants followed by 4 evolutions of the standard or hericle petiants followed by 4 evolutions of the standard or hericle petiants followed by 4 evolutions of the standard or hericle petiants followed by 4 evolutions of the standard or hericle petiants followed by 4 evolutions of the standard or hericle petiants.	Adjuvant cycles ofAdjuvant s	high risk – every 21 da the "Paclitaxel – Week standard risk – every 2 Drug	ays for 4 cycles fo ly" regimen 21 days for up to 6 Dose	S cycles Route	Comments
	Neo-adjuvant therapy for standard or harisk patients followed by 4 cycles of the "CMF (d1 + 8 or d1)" regimen standard risk or docetaxel in high risk.	Adjuvant cycles ofAdjuvant s	high risk – every 21 da the "Paclitaxel – Week standard risk – every 2	ays for 4 cycles fo ly" regimen 21 days for up to 6	6 cycles	
	risk patients followed by 4 cycles of the "CMF (d1 + 8 or d1)" regimen standard	Adjuvant cycles of Adjuvant Day(s)	high risk – every 21 da the "Paclitaxel – Week standard risk – every 2 Drug	ays for 4 cycles fo ly" regimen 21 days for up to 6 Dose	S cycles Route	Comments Bolus via fast running drip of
Epirubicin version 1.0)	risk patients followed by 4 cycles of the "CMF (d1 + 8 or d1)" regimen standard	Adjuvant cycles of Adjuvant Day(s) 1	high risk – every 21 da the "Paclitaxel – Week standard risk – every 2 Drug Epirubicin	pys for 4 cycles fo ly" regimen 21 days for up to 6 Dose 100mg/m²	S cycles Route	Comments Bolus via fast running drip of

Breast – Neo Adjuvant

Regimen		Indication			Drugs\HR	G	
	•	The neo-adjuvant treatment of HER2	Day(s)	Drug	Dose	Route	Comments
Frastuzumab - Loading dose version 1.0)	positive early breast cancer following a standard anthracycline based regimen or with a taxane following 4 courses of an anthracycline based regimen.	Week 1, day 1 only	Trastuzumab	8mg/kg	IV	Infusion in 250mL Sodium Chloride 0.9% over 90 mins	
		Туре	Days	HRG			
	•	riordopini driedia driily 20 dece iii	Procurement	1	Formulary		
		patients whose tumours have either HER2 overexpression or HER2 gene	Delivery	1	Day Case		
							combination with chemotherap
	•	The adjuvant treatment of HER2	Day(s)	Drug	Dose	Route	Comments
Maintenance dose	•	positive early breast cancer following a standard anthracycline based regimen or with a taxane following 4 courses of	Day(s) 1	Drug Trastuzumab	Dose 6mg/kg	Route IV	Comments Infusion in 250mL Sodium Chloride 0.9% over 90 mins
Maintenance dose	•	positive early breast cancer following a standard anthracycline based regimen or with a taxane following 4 courses of an anthracycline based regimen.	Day(s) 1 Type				Infusion in 250mL Sodium
Trastuzumab - Maintenance dose (version 1.0)	•	positive early breast cancer following a standard anthracycline based regimen or with a taxane following 4 courses of an anthracycline based regimen. Herceptin should only be used in	1	Trastuzumab	6mg/kg		Infusion in 250mL Sodium
Maintenance dose	•	positive early breast cancer following a standard anthracycline based regimen or with a taxane following 4 courses of an anthracycline based regimen.	1 Type	Trastuzumab	6mg/kg HRG		Infusion in 250mL Sodium

Adjuvant chemotherapy in high risk patients following 4 cycles of EC90 Adjuvant chemotherapy in high risk patients following 4 cycles of EC90 Type Days HRG Procurement 1 Formulary Delivery 1 Day Case Every 21 days for 4 cycles following 4 cycles of FEC or 3 cycles in combination with E-CMF Adjuvant therapy for standard risk patients following 4 cycles of the Adjuvant therapy for standard risk patients following 4 cycles of the Adjuvant therapy for standard risk patients following 4 cycles of the CMF (1 + 8) Pagins Days Dose Route Comments Comments Day(s) Drug Dose Route Comments Comments Comments Comments Day(s) Drug Dose Route Comments	Regimen		Indication	Drugs\HRG					
Type Days HRG Procurement 1 Formulary Delivery 1 Day Case • Every 21 days for 4 cycles following 4 cycles of FEC or 3 cycles in combination with E-CMF Adjuvant therapy for standard risk patients following 4 cycles of the "Epirubicin (NEAT/McNEAT Schedule)" regimen. Day(s) Drug Dose Route Comments 1 + 8 Cyclophosphamide 600mg/m² IV Bolus via fast running drip of Sodium Chloride 0.9% 1 + 8 Methotrexate 50mg/m² IV Bolus via fast running drip of Sodium Chloride 0.9% 1 + 8 5-Fluorouracil 600mg/m² IV Bolus via fast running drip of Sodium Chloride 0.9% Type Days HRG Procurement 1 & 8 Cost & Volume		•		Day(s)	Drug	Dose	Route	Comments	
Procurement 1 Formulary Delivery 1 Day Case • Every 21 days for 4 cycles following 4 cycles of FEC or 3 cycles in combination with E-CMF • Every 21 days for 4 cycles following 4 cycles of FEC or 3 cycles in combination with E-CMF • Adjuvant therapy for standard risk patients following 4 cycles of the "Epirubicin (NEAT/McNEAT Schedule)" regimen. • Adjuvant therapy for standard risk patients following 4 cycles of the "Epirubicin (NEAT/McNEAT Schedule)" Sodium Chloride 0.9% 1 + 8 Cyclophosphamide 600mg/m² IV Bolus via fast running drip of Sodium Chloride 0.9% 1 + 8 Methotrexate 50mg/m² IV Bolus via fast running drip of Sodium Chloride 0.9% 1 + 8 5-Fluorouracil 600mg/m² IV Bolus via fast running drip of Sodium Chloride 0.9% Type Days HRG Procurement 1 & 8 Cost & Volume	Docetaxel (version 1.0)			1	Docetaxel	100mg/m ²	IV	Infusion in 250mL Sodium Chlorid 0.9% over 1 hour	
Delivery 1 Day Case • Every 21 days for 4 cycles following 4 cycles of FEC or 3 cycles in combination with E-CMF • Adjuvant therapy for standard risk patients following 4 cycles of the "Epirubicin (NEAT/McNEAT Schedule)" regimen. • Adjuvant therapy for standard risk patients following 4 cycles of the "Epirubicin (NEAT/McNEAT Schedule)" 1 + 8 Cyclophosphamide 600mg/m² IV Bolus via fast running drip of Sodium Chloride 0.9% 1 + 8 Methotrexate 50mg/m² IV Bolus via fast running drip of Sodium Chloride 0.9% 1 + 8 5-Fluorouracil 600mg/m² IV Bolus via fast running drip of Sodium Chloride 0.9% Frocurement 1 & 8 Cost & Volume			Туре	Days	HRG				
Every 21 days for 4 cycles following 4 cycles of FEC or 3 cycles in combination with E-CMF Adjuvant therapy for standard risk patients following 4 cycles of the "Epirubicin (NEAT/McNEAT Schedule)" regimen. Day(s) Drug Dose Route Comments 1 + 8 Cyclophosphamide 600mg/m² IV Bolus via fast running drip of Sodium Chloride 0.9% 1 + 8 Methotrexate 50mg/m² IV Bolus via fast running drip of Sodium Chloride 0.9% 1 + 8 5-Fluorouracil 600mg/m² IV Bolus via fast running drip of Sodium Chloride 0.9% Type Days HRG Procurement 1 & 8 Cost & Volume Volume				Procurement	1	Formulary			
Adjuvant therapy for standard risk patients following 4 cycles of the "Epirubicin (NEAT/McNEAT Schedule)" regimen. Day(s) Drug Dose Route Comments 1 + 8 Cyclophosphamide 600mg/m² IV Bolus via fast running drip of Sodium Chloride 0.9% 1 + 8 Methotrexate 50mg/m² IV Bolus via fast running drip of Sodium Chloride 0.9% 1 + 8 5-Fluorouracil Type Days HRG Procurement 1 & 8 Cost & Volume				Delivery	1	Day Case			
Type Days HRG Procurement 1 & 8 Cyclophiosphiamide 600mg/m² IV Bolds via fast running drip of Sodium Chloride 0.9% Type Days HRG Procurement 1 & 8 Cyclophiosphiamide 600mg/m² IV Bolds via fast running drip of Sodium Chloride 0.9% Type Days HRG Procurement 1 & 8 Cyclophiosphiamide 600mg/m² IV Bolds via fast running drip of Sodium Chloride 0.9%	CMF (1 + 8)	•		, ,	•	_			
patients following 4 cycles of the "Epirubicin (NEAT/McNEAT Schedule)" regimen. 1 + 8				, , , , , , , , , , , , , , , , , , ,					
Type Days HRG Procurement 1 & 8 Cyclophiosphiamide 600mg/m² IV Bolds via fast running drip of Sodium Chloride 0.9% Type Days HRG Procurement 1 & 8 Cyclophiosphiamide 600mg/m² IV Bolds via fast running drip of Sodium Chloride 0.9% Type Days HRG Procurement 1 & 8 Cyclophiosphiamide 600mg/m² IV Bolds via fast running drip of Sodium Chloride 0.9%	CMF (1 + 8)	•		, ,	•	_			
Type Days HRG Procurement 1 & 8 Cost & Volume	MF (1 + 8) p	"Epirubicin (NEAT/McNEAT Schedule)"	1+0	Cyclophosphamide	600mg/m	IV			
Type Days HRG Procurement 1 & 8 Cost & Volume	(version 1.0)		"Epirubicin (NEAT/McNEAT Schedule)"			0			
Procurement 1 & 8 Cost & Volume	(version 1.0)		"Epirubicin (NEAT/McNEAT Schedule)"	1 + 8	Methotrexate		IV	Bolus via fast running drip of	
Volume	(version 1.0)		"Epirubicin (NEAT/McNEAT Schedule)"					Bolus via fast running drip of Sodium Chloride 0.9% Bolus via fast running drip of	
Delivery 1 Day Case	(version 1.0)		"Epirubicin (NEAT/McNEAT Schedule)"	1 + 8	5-Fluorouracil	600mg/m ²		Bolus via fast running drip of Sodium Chloride 0.9% Bolus via fast running drip of	
	(version 1.0)		"Epirubicin (NEAT/McNEAT Schedule)"	1 + 8 Type	5-Fluorouracil Days	600mg/m² HRG Cost &		Bolus via fast running drip of Sodium Chloride 0.9% Bolus via fast running drip of	

Regimen	Indication	Drugs\HRG					
	Adjuvant therapy for standard risk	Day(s)	Drug	Dose	Route	Comments	
CMF (d1) (version 1.0)	patients following 4 cycles of the "Epirubicin (NEAT/McNEAT Schedule)" regimen.	1	Cyclophosphamide	800mg/m ²	IV	Bolus via fast running drip of Sodium Chloride 0.9%	
	regimen.	1	Methotrexate	60mg/m ²	IV	Bolus via fast running drip of Sodium Chloride 0.9%	
		1	5-Fluorouracil	800mg/m ²	IV	Bolus via fast running drip of Sodium Chloride 0.9%	
		Type	Days	HRG			
		Procurement	1	Cost & Volume			
				VOIGITIO			
		Every 21 (1 days for 4 cycles follow	Day Case	Epirubicin reg	gimen +/- a Taxane"	
	Adjuvant chemotherapy in standard risk		·	Day Case	Epirubicin reg	gimen +/- a Taxane" Comments	
	patients.	• Every 21 (days for 4 cycles follow	Day Case ring 4 cycles of "E		Comments Bolus via fast running drip of	
EC90 (version 1.0)	 Adjuvant chemotherapy in high risk patients followed by 4 cycles of the "Docetaxel" regimen or 12 cycles of the 	• Every 21 (days for 4 cycles follow Drug	Day Case ring 4 cycles of "E Dose	Route	Comments	
	 Adjuvant chemotherapy in high risk patients followed by 4 cycles of the 	• Every 21 o	days for 4 cycles follow Drug Epirubicin	Day Case ring 4 cycles of "E Dose 90mg/m²	Route	Comments Bolus via fast running drip of Sodium Chloride 0.9% Bolus via fast running drip of	
	 Adjuvant chemotherapy in high risk patients followed by 4 cycles of the "Docetaxel" regimen or 12 cycles of the 	Day(s) 1	Drug Epirubicin Cyclophosphamide	Day Case ring 4 cycles of "E Dose 90mg/m² 600mg/m²	Route	Comments Bolus via fast running drip of Sodium Chloride 0.9% Bolus via fast running drip of	
	 Adjuvant chemotherapy in high risk patients followed by 4 cycles of the "Docetaxel" regimen or 12 cycles of the 	Day(s) 1 1 Type	Drug Epirubicin Cyclophosphamide Days	Day Case ring 4 cycles of "E Dose 90mg/m² 600mg/m² HRG Cost &	Route	Comments Bolus via fast running drip of Sodium Chloride 0.9% Bolus via fast running drip of	

Breas	t – Ad	iuvant

Regimen		Indication			Drugs\H	IRG	
		uvant therapy for standard risk	Day(s)	Drug	Dose	Route	Comments
Epirubicin version 1.0)	"CM the	patients followed by 4 cycles of the "CMF (McNEAT Schedule)" regimen or the "CMF Oral (NEAT Schedule)" regimen.	1	Epirubicin	100mg/m²	IV	Bolus via fast running drip of Sodium Chloride 0.9%
		Type	Days	HRG			
		Procurement	1	X70.3			
		Delivery	1	X72.3			
rastuzumab -		e adjuvant treatment of HER2	Day(s)	Drug	Dose	Route	Comments
Loading dose (version 1.0)	star	positive early breast cancer following a standard anthracycline based regimen or with a taxane following 4 courses of	Week 1, day 1 only	Trastuzumab	8mg/kg	IV	Infusion in 250mL Sodium Chloride 0.9% over 90 mins
•							
•		anthracycline based regimen.	Туре	Days	HRG		
`	an a	anthracycline based regimen. ceptin should only be used in	Type Procurement	Days 1	HRG X71.5		
	an aHerpati	anthracycline based regimen.	• •	Days 1 1			

Breas	t – Ad	iuvant

Regimen		Indication			Drug	s\HRG	
	•	The adjuvant treatment of HER2 positive	Day(s)	Drug	Dose	Route	Comments
Trastuzumab - Maintenance dose (version 1.0)		 early breast cancer following a standard anthracycline based regimen or with a taxane following 4 courses of an anthracycline based regimen. Herceptin should only be used in patients whose tumours have either HER2 overexpression or HER2 gene amplification as determined by an accurate 	1	Trastuzumab	6mg/kg	IV	Infusion in 250mL Sodium Chloride 0.9% over 90 mins
			Туре	Days	HRG		
	•		Procurement	1	X71.3		
			Delivery	1	X72.2		
	and validated assay.	 Patients v 				y 17 maintenance doses) ljuvant content should still only receive	
	•	Adjuvant therapy in patients no		Drug	Dose	Route	Comments
Gemcitabine & Docetaxel		responding to single agent Docetaxel an who have already completed a	1 0 0	Gemcitabine	1000mg/m ²	IV	Infusion in 250mL Sodium Chloride 0.9% over 15 mins
	anthracycline adjuvant component.		D	75mg/m ²	IV	1.6 -11. 050-1.0-1 011-11.	
		anthracycline adjuvant component.	8	Docetaxel	75mg/m	IV	Infusion in 250mL Sodium Chloride 0.9% over 90 mins
		anthracycline adjuvant component.	8 Type	Docetaxel	HRG		
(version 1.0)		anthracycline adjuvant component.			-		
		anthracycline adjuvant component.	Туре	Days	HRG		

Regimen	Indication	Drugs\HRG					
	Adjuvant therapy as alternative to E	- Day(s)	Drug	Dose	Route	Comments	
FEC '75' (version 1.0)	CMF or E – T - CMF.	1	5-Fluorouracil	600mg/m ²	IV	Bolus via fast running drip of Sodium Chloride 0.9%	
		1	Epirubicin	75mg/m ²	IV		
		1	Cyclophosphamide	600mg/m2	IV		
		Туре	Days	HRG			
		Procurement	1	Cost and Volume			
		Delivery	1	Day Case			
		• Every	21 days for 6 cycles				
	Adjuvant therapy as alternative to E	- Day(s)	Drug	Dose	Route	Comments	
FEC '100' (version 1.0)	CMF or E – T - CMF.	1	5-Fluorouracil	500mg/m ²	IV	Bolus via fast running drip of Sodium Chloride 0.9%	
		1	Epirubicin	100mg/m ²	IV	Coalain Cincinas 61676	
		1	Cyclophosphamide	500mg/m2	IV		
		Туре	Days	HRG			
		Procurement	1	Cost and Volume			
		Delivery	1	Day Case			
		• Every	21 days for 6 cycles				

Regimen		Indication			Drug	s\HRG	
	•	Third or subsequent line therapy for the	Day(s)	Drug	Dose	Route	Comments
Carboplatin / Etoposide		treatment of advanced breast cancer when anthracycline based regimens have failed	1	Carboplatin	AUC 4	IV	Infusion in 250mL Sodium Chloride 0.9% over 30mins.
version 1.0)		or are unsuitable.	1	Etoposide	100mg/ m ²	IV	
	•	For patients with brain mets as primary site of metastatic disease	1 - 3inc	Etoposide	50mg twice daily	РО	
			Туре	Days	HRG		
			Procurement	1	X70.2		
			Delivery	1	X72.1		
			Delivery	2 + 3	X72.4		
			Every 21 of toxicities	days for up to a t	total of 6 cycles or ur	ntii evidence (of disease progression or unacceptab
	•	The treatment of patients with locally	Day(s)	Drug	Dose	Route	Comments
Docetaxel (version 1.0)		advanced or metastatic breast cancer after failure of initial cytotoxic therapy. Previous chemotherapy should have included an anthracycline.	1	Docetaxel	75mg/m²	IV	Infusion in 250mL Sodium Chloride 0.9% over 1 hour
		ananaoyomio.	Туре	Days	HRG		
			Procurement	1	Formulary		
			Delivery	1	Day Case		

Regimen	Indication		Drugs\HRG						
-	Monotherapy for the treatment of locally		Drug	Dose	Route	Comments			
Capecitabine version 0.1)	advanced or metastatic breast cancer when have not previously received capecitabing in combination therapy and for who anthracycline and taxane-containing regimens have failed or further anthracycline therapy is not indicated.	e 1 - 14111C m g	Capecitabine	1250mg/m² twice daily	PO				
		Туре	Days	HRG					
		Procurement	1	Formulary					
		Delivery	1	Day case					

Regimen		Indication		Drugs\HRG					
_	•	The treatment of patients with loca		Drug	Dose	Route	Comments		
Docetaxel and Capecitabine		advanced or metastatic breast cancer preference to single agent docetaxel	n 1 - 141110	Capecitabine	1250mg/m ² twice daily	PO			
version 1.0)	people for whom anthracycline containing regimens are unsuitable or have failed and who have a good PS.		Docetaxel	60mg/m ²	IV	Infusion in 250mL Sodium Chlorid 0.9% over 1 hour			
			Туре	Days	HRG				
			Procurement	1	Formulary				
			Delivery	1	Day Case				
			Every 21 toxicities	days for up to a total c	of 6 cycles or until	evidence of o	disease progression or unacceptable		
		First line treatment of advanced brea	toxicities				disease progression or unacceptable		
	•	First line treatment of advanced brea cancer in chemotherapy naïve patients as a rechallenge if there is a disease from	toxicities St Day(s) or 1	days for up to a total of Drug Epirubicin	Dose	Route	Comments Bolus via fast running drip of		
	•	cancer in chemotherapy naïve patients as a rechallenge if there is a disease from interval > 2 years and the total anthracycline lifetime dose is not seen as the control of the control o	toxicities Day(s) 1 e	Drug	Dose 75mg/m	Route	Comments		
	•	cancer in chemotherapy naïve patients as a rechallenge if there is a disease from interval > 2 years and the total	toxicities Day(s) 1 e	Drug Epirubicin	Dose 75mg/m	Route	Comments Bolus via fast running drip of		
EC75 (version 1.0)	•	cancer in chemotherapy naïve patients as a rechallenge if there is a disease from interval > 2 years and the total anthracycline lifetime dose is not seen as the control of the control o	toxicities St Day(s) or e all 1	Drug Epirubicin Cyclophosphamide	Dose 75mg/m 500mg/m ²	Route	Comments Bolus via fast running drip of		
	•	cancer in chemotherapy naïve patients as a rechallenge if there is a disease from interval > 2 years and the total anthracycline lifetime dose is not seen as the control of the control o	toxicities Day(s) 1 e al ot Type	Drug Epirubicin Cyclophosphamide	Dose 75mg/m 500mg/m² HRG Cost &	Route	Comments Bolus via fast running drip of		

Regimen		Indication			Drugs	\HRG	
	•	Metastatic breast cancer	Day(s)	Drug	Dose	Route	Comments
pirubicin version 1.0)			1	Epirubicin	75mg/m²	IV	Bolus via fast running drip of Sodium Chloride 0.9%
			Туре	Days	HRG		
			Procurement	1	Cost & Volume		
			toxicities		· ·		
	•	Metastatic breast cancer	Every 21 (·	·	til evidence	of disease progression or unaccep
Epirubicin – Weekly (version 1.0)	•	Metastatic breast cancer	Every 21 toxicities	days for up to a	total of 6 cycles or unt		
	•	Metastatic breast cancer	Every 21 toxicities	days for up to a	total of 6 cycles or unt Dose	Route	Comments Bolus via fast running drip of
	•	Metastatic breast cancer	Every 21 toxicities Day(s) 1	days for up to a Drug Epirubicin	Dose 15mg/m² 25mg (fixed	Route IV	Comments Bolus via fast running drip of Sodium Chloride 0.9% Bolus via fast running drip of
	•	Metastatic breast cancer	Every 21 of toxicities Day(s) 1 OR	Drug Epirubicin Epirubicin	Dose 15mg/m² 25mg (fixed dose)	Route IV	Comments Bolus via fast running drip of Sodium Chloride 0.9% Bolus via fast running drip of

toposide - Low ose oral version 1.0)	•	Palliative		Indication			Drugs\HRG					
ose oral			treatment	of advanced/	Day(s)	Drug	Dose	Route	Comments			
		metastatic treated pati		er in heavily pre-	1 - 14inc	Etoposide	50mg twice daily	PO				
					Type	Days	HRG					
					Procurement	1	Cost & Volume					
					Delivery	1	Day Case					
					• Every 21 o	days for up to 6 cycles	s or until evidence	of disease p	rogression or unacceptable toxicitie			
						duration of etoposide nction and extent of p			ary from 5 days depending on bone			
	•			line therapy for	Day(s)	Drug	Dose	Route	Comments			
EC 75 version 1.0)		the treatme	ent of advance	ed breast cancer.	1	5-Fluorouracil	600mg/m ²	IV	Bolus via fast running drip of Sodium Chloride 0.9%			
					1	Cyclophosphamide	600mg/m ²	IV	Bolus via fast running drip of Sodium Chloride 0.9%			
					1	Epirubicin	75 mg/m²	IV	Bolus via fast running drip of Sodium Chloride 0.9%			
					Туре	Days	HRG					
					Procurement	1	Cost & Volume					
					Delivery	1	Day Case					

Breast	-	Metas	tatio

Regimen	Indication			Drugs\	HRG	
	Metastatic breast cancer in patients w		Drug	Dose	Route	Comments
Gemcitabine and Paclitaxel	have relapsed following adjuvant/neoadjuvant chemotherapy.	oy.	Paclitaxel	175mg/m²	IV	Infusion in 500mLs Sodium Chloride 0.9% over 3 hours
(version 1.0)	Prior chemotherapy should have included and anthracycline, unless clinical contra-indicated.		Gemcitabine	1250mg/m²	IV	Infusion in 100 - 250mLs Sodium Chloride 0.9% over 30 - 60 minutes
		Туре	Days	HRG		
		Procurement	1 & 8	Formulary		
		Delivery	1 & 8	Day Case		
	The treatment of nationts with levelly	Day(s)	Drug	Dose	Route	Comments
Paclitaxel	The treatment of patients with locally advanced or metastatic breast cancer	Day(s)	Drug			
(version 1.0)	after failure of initial cytotoxic therapy. Previous chemotherapy should have included an anthracycline or an alkylati	1 ng	Paclitaxel	175mg/m²	IV	Infusion in 500mL Sodium Chloride 0.9% over 3 hours
	agent.	Type	Days	HRG		
		Procurement	1	Formulary		
		Delivery	1	Day Case		
		Every 21 toxicities	days for up to a tot	tal of 6 cycles or until	evidence of o	disease progression or unacceptable

Regimen		Indication			Drug	s\HRG	Drugs\HRG					
	•	The treatment of patients with locally	Day(s)	Drug	Dose	Route	Comments					
Paclitaxel – Weekly (version 1.0)	failu chei	advanced or metastatic breast cancer after failure of initial cytotoxic therapy. Previous chemotherapy should have included an anthracycline or an alkylating agent.		Paclitaxel	50 to 90 mg/m²	IV	Infusion over 60 minutes in 250mL Sodium Chloride 0.9% over 60 minutes					
			Type	Days	HRG							
			Procurement	1	Formulary							
			Delivery	1	Day Case							
	<u> </u>		toxicities									
		In combination with a taxane for the	Day(s)	Drug	Dose	ROUTE	Comments					
Trastuzumab -	treatment of locally advanced or metastatic breast cancer after failure of initial cytotoxic therapy. Previous treatment	Day(s)	Drug	Dose	Route	Comments						
Trastuzumab - Loading dose (version 1.0)	•	treatment of locally advanced or metastati breast cancer after failure of initial cytotoxic therapy. Previous treatment		Drug Trastuzumab	Dose 8mg/kg	Route IV	Comments Infusion in 250mL Sodium Chloride 0.9% over 90 mins					
Loading dose	•	treatment of locally advanced or metastati breast cancer after failure of initial cytotoxic therapy. Previous treatment should have included an anthracycline. Herceptin should only be used in patient	Week 1, day 1 only				Infusion in 250mL Sodium Chloride					
Loading dose	•	treatment of locally advanced or metastati breast cancer after failure of initial cytotoxic therapy. Previous treatment should have included an anthracycline.	Week 1, day 1 only Type Procurement	Trastuzumab	8mg/kg		Infusion in 250mL Sodium Chloride					

Regimen	Indication		Drugs\HRG					
	In combination with a taxane for the	• • • • • • • • • • • • • • • • • • • •	Drug	Dose	Route	Comments		
Trastuzumab - Maintenance dose (version 1.0)	treatment of locally advanced or metastatic breast cancer after failure of initial cytotoxic therapy. Previous treatment should have included an anthracycline.	nt	Trastuzumab	6mg/kg	IV	Infusion in 250mL Sodium Chloride 0.9% over 90 mins		
	Herceptin should only be used in particular in the state of the s	_	Days	HRG				
	whose tumours have either HER2	Procurement	1	Formulary				
	overexpression or HER2 gene amplification as determined by an a and validated assay.	occurate Delivery	1	Day Case or HC@H				
	Second or subsequent line therapy	for the Day(s)	Drug	Dose	Route	Comments		
Vinorelbine – Weekly	treatment of advanced breast cancer		Vinorelbine	25mg/m² (max	IV	IV infusion in 50mLs Sodium		
(version 1.0)	anthracycline based regimens have failed or are unsuitable.		vinoreibine	60mg)	IV	Chloride 0.9% over 5-10mins - follow national and local guidance.		
		Туре	Days	HRG				
		Procurement	1	Formulary				
		Delivery	1	Day Case				
				10	lawaa af diad	ease progression or unacceptable		

Breast – Metastati	С
--------------------	---

Regimen	Indication		Drugs\HRG					
(2 1)	Palliative therapy in patients with	Day(s)	Drug	Dose	Route	Comments		
Vinorelbine (Oral) (version 1.0)	advanced breast cancer previously treate with or not suitable for anthracyclines and/or taxanes. Hormone receptor positive	1,0+13	Vinorelbine	60mg/m²	PO			
	patients must also have failed hormonal	Туре	Days	HRG				
	therapy, unless they were unsuitable for these treatments.	Procurement	1, 8 &15	Formulary				
	Herceptin should only be used in patier whose tumours have either HEI	•	1, 8 & 15	Day Case				
	overexpression or HER2 ge amplification as determined by an accura and validated assay.	LVCIVZI	days for a total of	6 cycles or until ev	idence of disease p	progression or unacceptable		