medanta THE MEDICITY | dedicated to life

Dr. ASHOK K. VAID
MD, DM
Chairman - Medical Oncology & Hematology
Medanta Cancer Institute

24th July 2012

Dear Doctor

Mrs. Mahwash Raza, 48yrs old female, from Bangladesh, UHID-MM00254910, known diabetic for 4yrs, on Insulin, known hypertensive for 2 yrs - on medication. She had been symptomatic with pain epigastrium for 2 months, with anorexia, nausea, fatigue, right lower molar pain. Evaluated at Medanta: Dynamic CT abdomen (23/6/12): Locally invasive predominantly uncinate process lesion causing encasement of locoregional vessels with upstream pancreatic ductal dilatation but negative for intra or extrahepatic biliary ductal dilatation at present. EUS guided FNAC (26/6/12): positive for malignancy suggestive of poorly differentiated carcinoma. Whole body PET-CECT done on 12/07/12 showed an infiltrative FDG avid (SUVmax 7.25) hypodense mass - 2.6 x 1.8 x 2.3 cm from the neck to adjacent head and uncinate process of pancreas. The mass was seen to be stricturing and encasing the confluence of splenic vein, SMV and portal vein with non-visualization of the distal splenic vein, SMV and the formation of the portal vein. The mass is also seen to surround the SMA up to 360° for a considerable distance. The right and left hepatic arteries are arising from superior mesenteric artery and are also encased by the mass at their origins. There was upstream pancreatic ductal dilatation (6mm) with atrophy of the pancreatic body and tail. Multiple non-FDG avid locoregional lymph nodes measuring up to a cm in short axis were seen in the peripancreatic area. She was diagnosed as a case of poorly differentiated carcinoma pancreas. She was planned for Neoadjuvant chemotherapy with Gemcitabine + Cisplatin q 3 weekly) for 9 weeks followed by reassessment including imaging & laproscopy; followed by surgery/chemoradiation. Discussed about the nature of disease with the family (husband, brother & son), the planned therapy, the likely response rates, toxicities, likely expenditure & prognosis etc. Patient refused palliative RT at present, wish to proceed with planned chemotherapy. She has received cycle 1 day 1 chemotherapy on 17.07.12 and day 8 chemotherapy on 24.07.12, now patient wishes to continue rest of chemotherapy at her native place. Kindly give her 2 more cycles of chemotherapy as per the details given below:

Chemotherapy Schedule:
Inj Gemcitabine 1000mg/m2 iv on day 1 and day 8 (1600mg day 1 and day 8)
Inj Cisplatin 75mg/m2 mg IV divided on day 1,2 (50mg on day1 and 50mg on day2)
Inj. G-CSF 300 mg S/C once a day for 3 days from Day 3 (24 hrs after completing the chemotherapy)

Same cycle is to be repeated every 3 weekly for 2 cycles followed by response assessment with PET-CECT with comparison followed by further treatment.

Chemotherapy administration on Day 1 :-
Cap Aprepitant 125 milligram PO stat before chemotherapy, without regard to foodfollowed by 80 mg on day 2 and day 3
Inj Dexamethasone 8 mg + Inj Granisetron 1 mg IV in100 ml NS in 20 min
Inj Metoclopramide 10 milligram IV 6 hourly
Inj Ranitidine 50 milligram IV stat and TDS
Inj Cytogem 1600 mg IV in 100 ml NS STRICTLY OVER 30 MINS
Injection Normal Saline 500 ml IV Infuse over 2 hours
Injection Cisplatin 50 mg IV in 500 ml Normal Saline Infuse over 60 minutes
Injection Mannitol 300 ml IV in 30 minutes
Inj KCl 20 meq IV in 500 ml Normal Saline Infuse over 60 minutes
Inj MgSO4 1 gram IV in 500 ml Normal Saline in 60 minutes

Chemotherapy administration on Day 2 :-
Cap Aprepitant 80 milligram PO stat before chemotherapy, without regard to food followed by 80 mg on next day
Inj Dexamethasone 8 mg + Inj Granisetron 1 mg IV in100 ml NS in 20 min
Inj Metoclopramide 10 milligram IV 6 hourly

For Appointment : 9810089312, Mob. No. 9810212235 Email : ashok.vaid@medanta.org

Medanta-The Medicity:
Sector - 38, Gurgaon, Haryana - 122 001, India
+91 124 4141 414 Fax: +91 124 4834 111

Medanta Mediclinic:
E-18, Defence Colony, New Delhi - 110 024
+91 11 4411 4411 Fax: +91 11 2433 1433

info@medanta.org
www.medanta.org

medanta THE MEDICITY | dedicated to life

Dr. ASHOK K. VAID
MD, DM
Chairman - Medical Oncology & Hematology
Medanta Cancer Institute

Inj Ranitidine 50 milligram IV stat and TDS
Injection Normal Saline 500 ml IV Infuse over 2 hours
Injection Cisplatin 50 mg IV in 500 ml Normal Saline Infuse over 60 minutes
Injection Mannitol 300 ml IV in 30 minutes
Inj KCl 20 meq IV in 500 ml Normal Saline Infuse over 60 minutes
Inj MgSO4 1 gram IV in 500 ml Normal Saline in 60 minutes

Chemotherapy administration on Day 8 :-
Inj Dexamethasone 8 mg + Inj Granisetron 1 mg IV in100 ml NS in 20 min
Inj Metoclopramide 10 milligram IV stat
Inj Ranitidine 50 milligram IV stat
Injection Cytogem 1600 mg IV in 100 ml Normal Saline STRICTLY over 30 minutes
Inj. NS 100ml in 20 minutes

Post chemotherapy Medication:-
Inj. G-CSF 300 mcg subcutaneous once daily for 3 days from day 3 (24 hrs completing the chemotherapy.
Tab.Crocin (500 mg) half hour before Inj. G-CSF
Tab. Domstal (10mg) 1 thrice daily (30 minutes before meal) for 5 days from day 3 & day 9 (Though this medication is prescribed for 5 days, you may continue it, if nausea or vomiting persist)
Tab. Granisetron 1mg after breakfast once daily in morning for 4 days from day 3 & day 9
Tab. Pan-40 Once daily (Empty stomach) for 5 days from day 3 & day 9
Tab.Supradyn 1 tab once daily (After food) to continue
Tab Pregabalin 75 mg twice a day to continue
Clohex (Clorhexidine) mouth wash four times daily (2 teaspoons of Clorhexidine rinse and gargle for 30 seconds, preferably after meals)
Plenty of oral fluids
Tab Librax 1 tablet SOS for pain abdomen (You may take take upto 3 or 4 times a day with a gap of at least 6 hours between 2 doses. Take the medicine preferably before food)
Inj. Perinorm 1 ampoule I/M SOS for vomiting (You may take take upto 3 or 4 times a day with a gap of at least 6 hours between 2 doses)
Syp. Lactulose 15 ml at bedtime SOS for constipation.(Syp lactulose 15 ml can be taken upto three times a day according to individual need. Please do not take if u are having loose stools)
CONTINUE OTHER MEDICATIONS (Including Insulin) AS ADVISED BY ENDOCRINOLOGIST

It should be noted that this letter is only recommendatory in nature and is being written because the patient wishes to start treatment at his native place. The chemotherapy regimen mentioned above should be undertaken by a doctor who is trained and experienced in handling chemotherapy drugs. The treating doctor should exercise his/her judgment at all times including modification/termination of the regimen if required. The responsibility for the appropriate conduct of the above-mentioned regimen, including management of any side effects, shall lie with the treating doctor.

Please repeat the CBC, RFT and LFT before every cycle. The next cycle should be started only if the WBC count is >4000/mm3. Hb >10 gm% and the platelet count is >100000/mm3. In case the patient develops fever at anytime she should be immediately started on parenteral broad spectrum antibiotics and the CBC should be done at that time.

For Appointment : 9810089312, Mob. No. 9810212235 Email : ashok.vaid@medanta.org

Medanta-The Medicity:
Sector - 38, Gurgaon, Haryana - 122 001, India
+91 124 4141 414 Fax: +91 124 4834 111

Medanta Mediclinic:
E-18, Defence Colony, New Delhi - 110 024
+91 11 4411 4411 Fax: +91 11 2433 1433

info@medanta.org
www.medanta.org

medanta | dedicated to life
THE MEDICITY

Dr. ASHOK K. VAID
MD, DM
Chairman - Medical Oncology & Hematology
Medanta Cancer Institute

Patient should follow-up with us after 2 weeks of completion of chemotherapy (on 17/09/2012) for response evaluation and further management. Patient is come back to us for reassessment and further management. We wish her good luck for her treatment. Please don't hesitate to interact with us in case any further information is required.

Thanks & regards,

Dr. Ashok K. Vaid, MD, DM
Chairman
Medical Oncology & Haematology
Email: akvaid@yahoo.com

Jyoti Wadhwa

Dr. Jyoti Wadhwa, MD, DM
Associate Director
Medical Oncology & Haemato-Oncology
Email: jyotiwadhwa@hotmail.com

Dr. JYOTI WADHWA
MD, DM (Medical Oncology)
Commonwealth Scholar (London, UK)
Associate Director
Division of Medical Oncology & Haematology
Medanta Cancer Institute
Medanta - The Medicity
Sector-38, Gurgaon-122 001
Regn. No. HN-5701