Vincristine Sulphate

【IVIN】Vincristine® 1mg/1mL/Vial *ATC Code：L01CA02*

中文名： 文克斯汀注射液 «瑞帝 DBL(福鼎代理)»

適應症： 急性白血病。

藥理分類： **Antineoplastic Agent, Antimicrotubular; Vinca Alkaloid.**

用法用量： ***Note:***

- Doses may be capped at a maximum of **2 mg/dose**. Dosing and frequency may vary by protocol and/or treatment phase; refer to specific protocol.
- In order to prevent inadvertent intrathecal administration, the World Health Organization (WHO) and the Institute for Safe Medication Practices (ISMP) strongly recommend **dispensing vincristine in a minibag (**NOT a syringe).

Administration: IV only. 本藥有刺激性，本藥僅供靜脈注射製備使用。

Indications and dosage regimen:

Acute lymphocytic leukemia (ALL): IV:

Hyper-CVAD regimen:

2 mg/dose days 4 and 11 during odd-numbered cycles (cycles 1, 3, 5, 7) of an 8-cycle phase, followed by maintenance treatment (if needed) of 2 mg monthly for 2 years (Kantarjian, 2004)

CALBG 8811 regimen:

Induction phase:

2 mg/dose days 1, 8, 15, and 22 (4-week treatment cycle)

Early intensification phase:

2 mg/dose days 15, and 22 (4-week treatment cycle, repeat once)

Late intensification phase:

2 mg/dose days 1, 8, 15 (8-week treatment cycle)

Maintenance phase:

2 mg/dose day 1 every 4 weeks until 24 months from diagnosis (Larson, 1995)

Central nervous system tumors: IV:

PCV regimen:

1.4 mg/m^2/dose (maximum dose: 2 mg) on days 8 and 29 of a 6-week treatment cycle for a total of 6 cycles (van de Bent, 2006) or 1.4 mg/m^2/dose (no maximum dose) on days 8 and 29 of a 6-week treatment cycle for up to 4 cycles.

Hodgkin lymphoma: IV:

BEACOPP regimen:

1.4 mg/m^2/dose (maximum dose: 2 mg) on day 8 of a 21-day treatment cycle.

Stanford-V regimen:

1.4 mg/m^2/dose (maximum dose: 2 mg) in weeks 2, 4, 6, 8, 10, and 12 (Horning, 2000; Horning, 2002)

Non-Hodgkin lymphoma: IV:

Burkitt lymphoma:

CODOX-M/IVAC:

Cycles 1 and 3 (CODOX-M): 1.5 mg/m^2 (no maximum dose) days 1 and 8 of cycle 1 and days 1, 8, and 15 of cycle 3 (Magrath, 1996) or 1.5 mg/m^2 (maximum dose: 2 mg) days 1 and 8 of cycles 1 and 3 (Mead 2002; Mead 2008); CODOX-M is in combination with cyclophosphamide, doxorubicin, methotrexate, and CNS prophylaxis and alternates with IVAC (etoposide, ifosfamide, mesna, cytarabine, and CNS prophylaxis) for a total of 4 cycles.

Hyper-CVAD:

2 mg (flat dose) days 4 and 11 of courses 1, 3, 5, and 7 (in combination with

cyclophosphamide, doxorubicin, and dexamethasone) and alternates with even courses 2, 4, 6, and 8 (methotrexate and cytarabine) (Thomas, 2006)

Follicular lymphoma:

CVP regimen:

1.4 mg/m^2/dose (maximum dose: 2 mg) on day 1 of a 21-day treatment cycle (in combination with cyclophosphamide and prednisone) for 8 cycles.

Large B-cell lymphoma:

CHOP regimen:

1.4 mg/m^2/dose (maximum dose: 2 mg) on day 1 of a 21-day treatment cycle for 8 cycles.

EPOCH regimen:

0.4 mg/m^2/day continuous infusion for 4 days (over 96 hours) (total 1.6 mg/m2/cycle; dose not usually capped) of a 21-day treatment cycle.

不良反應： 噁心、嘔吐、口腔潰瘍、靜脈炎、便秘。

交互作用：

- **Itraconazole**, fluconazole, voriconazole, ritonaviR: ↑ plasma concentrations of vinCRIStine and an increased risk of neurotoxicity and paralytic ileus.
- **Warfarin**: ↑ risk for elevated INR and subsequent bleeding.
- **Filgrastim**: severe peripheral neuropathy.
- **St John's wort, Carbamazepine**, rifampin, rifabutin, rifapentine: ↓ vinCRIStine plasma concentrations.
- **P-GP inhibitors**(Erythromycin, clarithromycin, verapamil, amiodarone, carvedilol, dronedarone): ↑ vinCRIStine plasma concentrations.
- **Phenytoin**: ↓vinCRIStine plasma concentrations and ↓phenytoin plasma concentrations with increased seizure activity.

注意事項： 1.本藥不可稀釋於 pH 值 3.5-5.5 以外之範圍。不可和任何混合物混合，除了 0.9%的 Sodium Chloride 或 5% Glucose 注射液。

2. 本劑為起泡劑(vesicant)且外滲時可能引起嚴重局部反應。如果 I.V.投予本劑外洩到周圍的組織，應立即中止輸注，剩餘部份改由其他靜脈投予。曾以局部注射 hyaluronidase 及**熱敷**擴散本藥，以減輕不適和避免可能的組織損害。

懷 孕 期： 1. 1.孕婦或有生育能力婦女應避免使用，或在治療過程中避免懷孕。

2.Vincristine may cause fetal harm if administered during pregnancy. Females of reproductive potential should avoid becoming pregnant during treatment.

授 乳 期： 1. 本藥不應投給正在哺乳的婦女。

2.至今未知是否會在人乳汁排出。因為許多藥物會在人乳汁中排出，也因為人哺育的嬰兒服用 vincristine 可能引起嚴重的不良反應，**應該在停止餵乳和服用本藥對母親的重要性兩者之一做決定**。