

Ixabepilone and Capecitabine (IC)

Ixabepilone and Capecitabine (IC) Regimen ¹⁻⁴																							
Drug	Dose	Route	Administered on day(s)																			Total dose/ cycle	
			1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19		20
Ixabepilone	40 mg/m ²	IV	X																				40 mg/ m ²
Capecitabine ^a	2000 mg/m ²	PO ^a	X	X	X	X	X	X	X	X	X	X	X	X	X								28,000 mg/m ²
Repeated every 3 weeks																							

^a Given as 1000 mg/m² PO twice daily.

CONSTITUENT DRUGS

- Ixabepilone (*Ixempra*)
- Capecitabine (*Xeloda*)

SYNONYMS

- IC

USES

- Treatment of locally advanced or metastatic breast cancer previously treated with, or resistant to, a taxane and an anthracycline¹⁻⁴
- A recommended regimen for the treatment of recurrent or metastatic breast cancer⁵

SUPPORTIVE CARE

Emetogenicity

- Predicted: 10% to 30% (low) (see p. 518)

Diarrhea

- Capecitabine (see p. 522)

Hypersensitivity

- Ixabepilone can induce acute hypersensitivity reactions (eg, flushing, rash, dyspnea, bronchospasm) due to *Cremophor EL* and dehydrated alcohol diluent.

- Premedicate with an H₁ and H₂ antagonist approximately 1 hour prior to administration of ixabepilone.⁸
- Premedicate with a corticosteroid in addition to an H₁ and H₂ antagonist in subsequent cycles if a hypersensitivity reaction occurs.⁸

Myeloid Growth Factors

- Prophylactic use not recommended (see p. 522).
- Leukopenia (grade 3 or 4): 55% to 63%¹⁻⁴
- Neutropenia
 - Grade 3 or 4: 68% to 73%¹⁻⁴
 - Febrile (grade 3 or 4): 4% to 5%^{1,2,4}

Neurotoxicity

- Capecitabine (see p. 523)

TOXICITIES

Common (> 50%)

- Hematologic
 - Leukopenia
 - ◆ Grade 3 or 4: 55% to 63%¹⁻⁴
 - Neutropenia
 - ◆ Grade 3 or 4: 68% to 73%¹⁻⁴
 - ◆ Febrile (grade 3 or 4): 4% to 5%^{1,2,4}
- Neurologic

- Neurologic toxicity, any
 - ◆ All grades: 81%³
 - ◆ Grade 3: 19%³

Frequent (20% to 50%)

- *Dermatologic*
 - Hand-foot syndrome
 - ◆ Grade 3: 18% to 34%^{1,3,4}
 - ◆ Grade 3 or 4: 21%²
- *Metabolic*
 - Fatigue/Asthenia
 - ◆ Grade 3 or 4: 9% to 33%¹⁻⁴
- *Neurologic*
 - Myalgia/Arthralgia
 - ◆ Grade 3 or 4: 2% to 23%¹⁻⁴
 - Peripheral neuropathy
 - ◆ Grade 3 or 4: 23% to 26%^{1,2,4}

Infrequent (5% to 19%)

- *Cardiovascular*
 - Dehydration
 - ◆ Grade 3 or 4: 2% to 5%^{1,3}
- *Gastrointestinal*
 - Constipation
 - ◆ Grade 3: 7%³
 - Diarrhea
 - ◆ Grade 3: 6% to 10%^{1,3,4}
 - ◆ Grade 3 or 4: 7%²
 - Nausea
 - ◆ Grade 3: 3% to 16%^{1,3,4}
 - Vomiting
 - ◆ Grade 3: 4% to 10%^{1,3,4}
- *Hematologic*
 - Anemia
 - ◆ Grade 3 or 4: 5% to 10%^{1,2,4}
 - Thrombocytopenia
 - ◆ Grade 3 or 4: 6% to 8%^{1,2,4}

Uncommon (1% to 4%)

- *Dermatologic*
 - Nail disorder
 - ◆ Grade 3: 2%¹
 - Skin exfoliation
 - ◆ Grade 3: 1%¹
 - Skin rash
 - ◆ Grade 3: 1% to 2%^{1,3}
- *Gastrointestinal*
 - Anorexia
 - ◆ Grade 3: 3%^{1,3}
 - Gastroesophageal reflux disease
 - ◆ Grade 3: 1%¹
 - Stomatitis/Mucositis
 - ◆ Grade 3 or 4: 2% to 4%¹⁻⁴

- *Neurologic*
 - Abdominal pain
 - ◆ Grade 3: 2%¹
 - Dizziness
 - ◆ Grade 3: 1%¹
 - Musculoskeletal pain
 - ◆ Grade 3: 2%¹
- *Pulmonary*
 - Dyspnea
 - ◆ Grade 3 or 4: 1% to 2%^{1,3}
- *Treatment-related death*
 - Neutropenia-related toxicity: 3%¹
 - Neutropenia-related toxicity with liver dysfunction at baseline: 1%¹

RECOMMENDED LABORATORY TESTS

Baseline

- AST/ALT
- Total bilirubin
- Serum creatinine
- CBC with differential

Prior to Each Treatment

- AST/ALT
- Total bilirubin
- Serum creatinine
- CBC with differential

Recommended Pretreatment Values

- ANC
 - A pretreatment ANC of 1,000 cells/mcL is usually considered acceptable for treatment.
- Platelets
 - A pretreatment platelet count of 75,000 cells/mcL is usually considered acceptable for treatment.

DOSAGE MODIFICATIONS

Renal Function (see p. 526)

Liver Function (see p. 531)

- Reduce ixabepilone by 20% for AST or ALT >2.5 times ULN and ≤ 10 times ULN and bilirubin ≤ 1.5 times ULN.⁸
- Reduce ixabepilone by 25% to 50% for AST or ALT > 2.5 times ULN and ≤ 10 times ULN and bilirubin > 1.5 to 3 times ULN.⁸
- Omit ixabepilone for AST or ALT > 10 times ULN or bilirubin > 3 times ULN.⁸

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