

高雄榮民總醫院

肺癌（非小細胞癌）診療原則

癌症中心 肺癌醫療團隊擬定

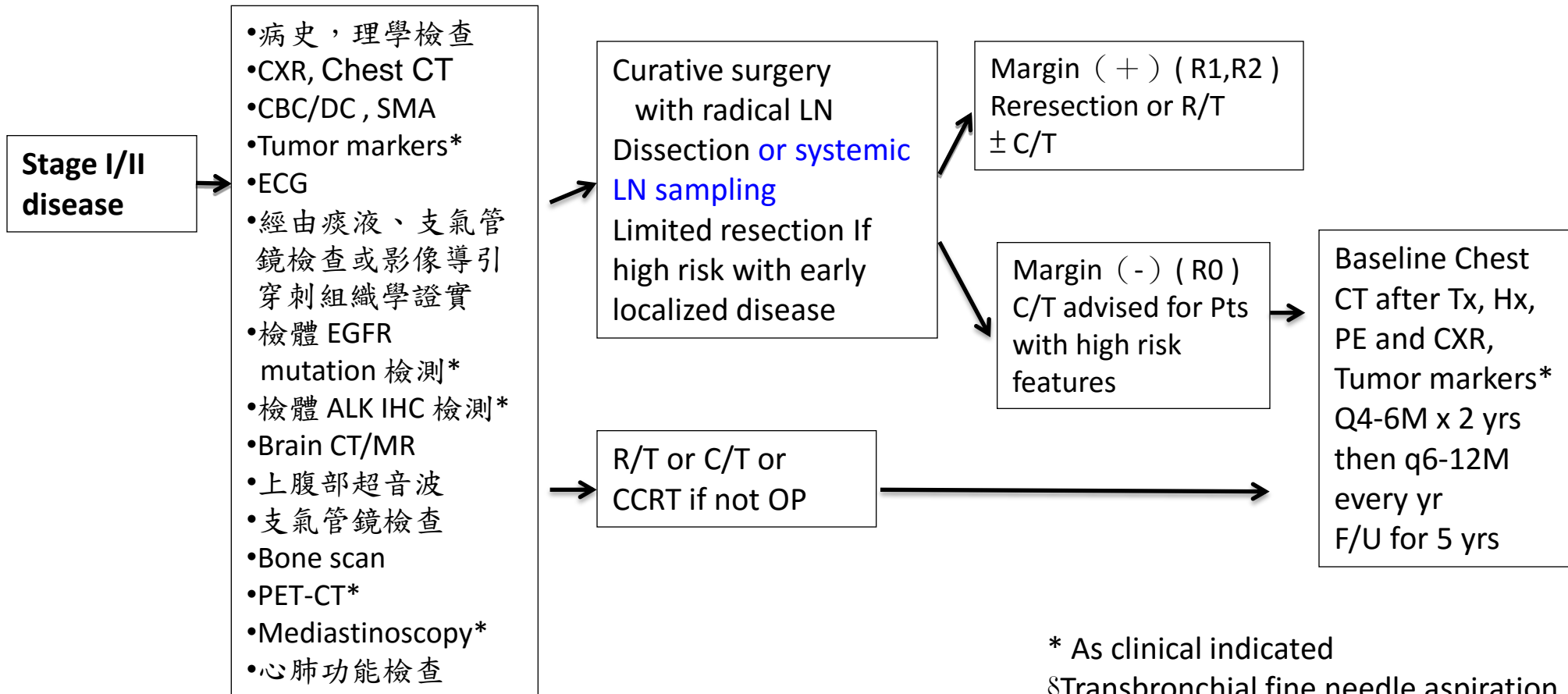
Reference: NCCN Clinical Practice Guideline in Oncology™, NSCLC, V.5.2015

非小細胞肺癌

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診斷	評估	初步治療	輔助治療	追蹤
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* As clinical indicated

§ Transbronchial fine needle aspiration

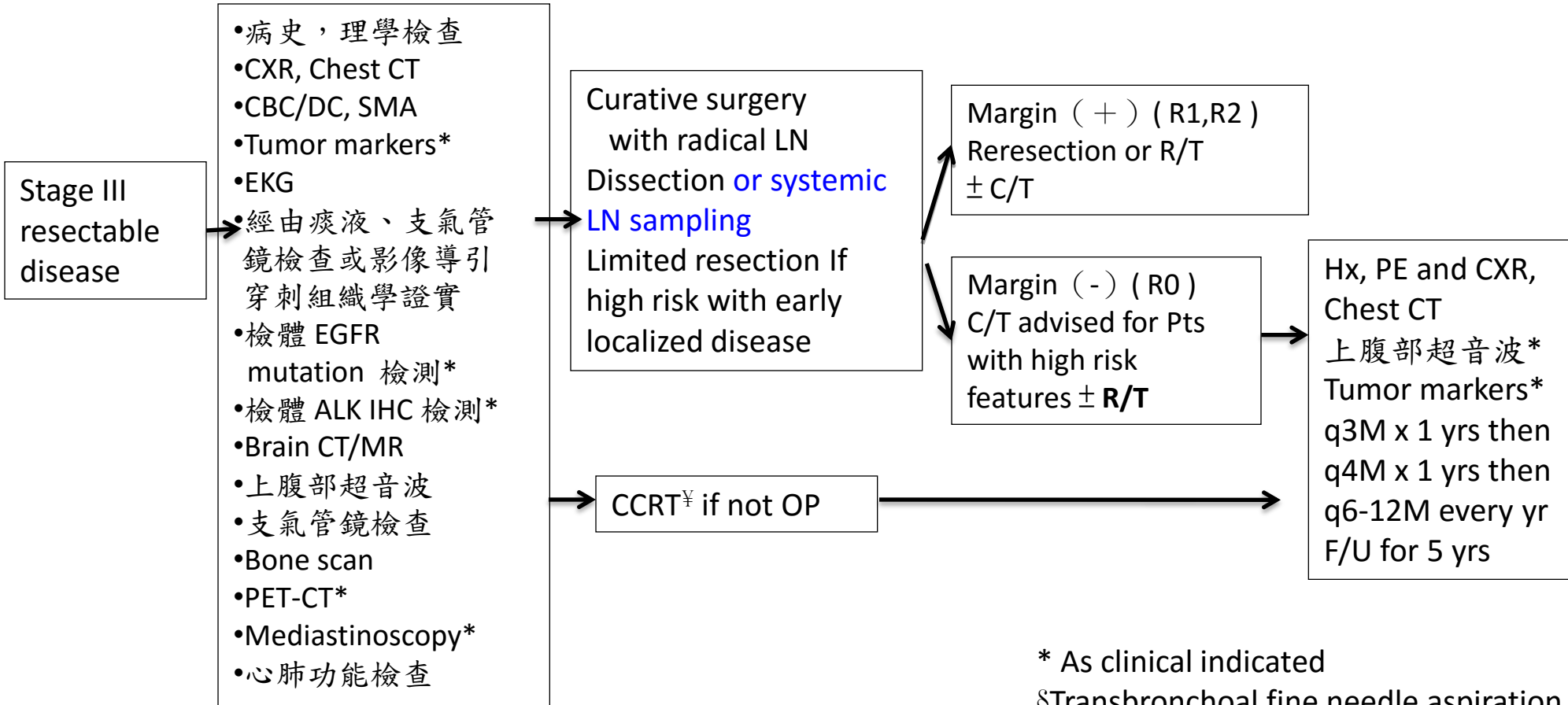
¥ Concurrent chemoradiotherapy

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診斷	評估	初步治療	輔助治療	追蹤
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§ Transbronchoal fine needle aspiration

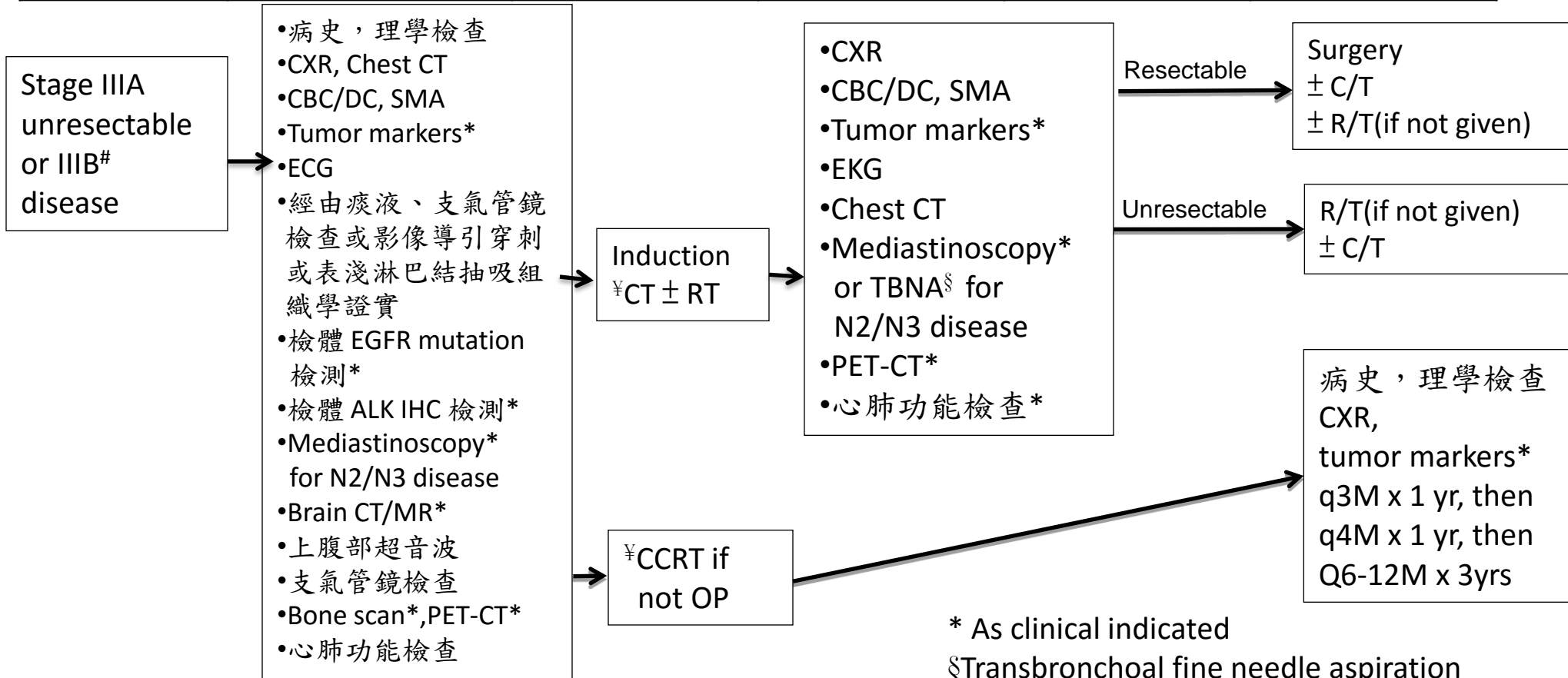
¥ Concurrent chemoradiotherapy

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診斷	評估	初步治療	重新評估	進一步治療	追蹤
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診斷

評估

治療

重新評估

治療

- 病史，理學檢查
- CXR
- Chest CT
- CBC/DC, SMA
- Tumor markers*
- EKG
- 經由痰液、肋膜積液、支氣管鏡檢查或影像導引穿刺或表淺淋巴結抽吸組織學證實
- 檢體 EGFR mutation 檢測*
- 檢體 ALK IHC 檢測*
If IHC positive, confirm by FISH
- 上腹部超音波檢查
- Bone scan*
- Brain CT/MRI*
- PET-CT*

M1a
M1b

Solitary
Brain /
adrenal
Metastasis
with
resectable
Lung lesion

Brain

Surgery or R/T to brain + C/T followed by lung resection

Adrenal gland

Surgery or R/T to both lung and adrenal tumors

Disseminated
Metastasis

Positive
EGFR mutation

Gefitinib or Erlotinib or Afatinib

Negative

C/T with 2 agents ± bevacizumab
C/T for 4 to 6 cycles

Disseminated
Metastasis

Negative
ALK
Positive

Crizotinib

Poor Performance
status

Best supportive care
or single agent C/T

Hx, PE and Tumor markers*, CXR
q3-4W x 6m then
q8W x 1 yr then
q12w x 1 yr

Observation if responsive,
Maintenance therapy in selected Pts,
2nd line C/T or supportive care if disease progression

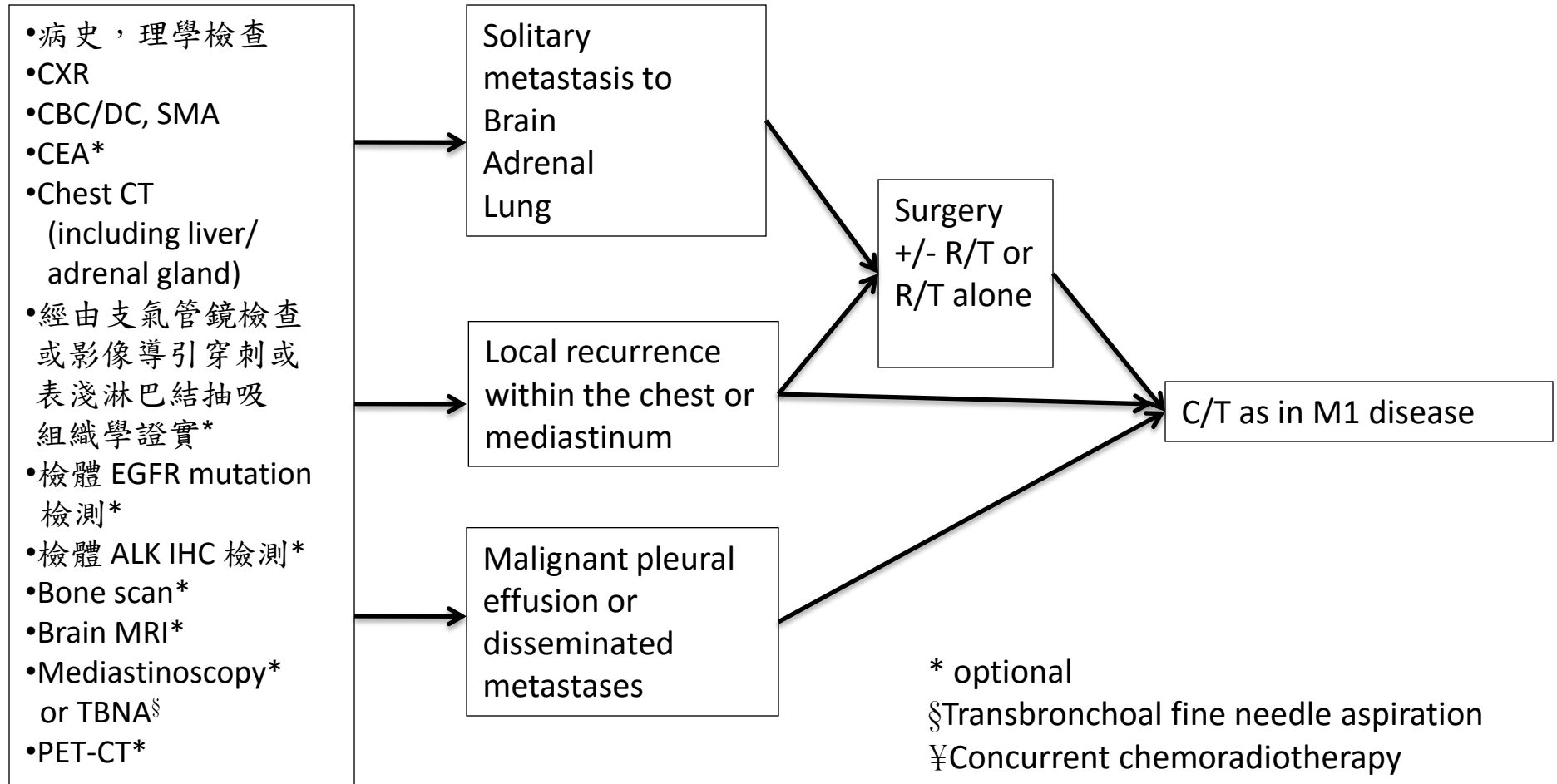


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復發



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一線化學治療處方

Published C/T Regimens	Schedule
Cisplatin 60-75 mg/m ² , IV, D15 + Vinorelbine 25 mg/m ² , IV, D1,8,15	Q28 d x 4-6 cycles
Cisplatin 60-75 mg/m ² , IV, D8 + Vinorelbine 60 -75 mg /m ² , PO, D1,8	Q21 d x 4 -6 cycles
Cisplatin 60-75 mg/m ² , IV, D15 + Docetaxel 30 mg/m ² , IV, D1,8,15	Q28 d x 4-6 cycles
Cisplatin 60-75 mg/m ² , IV, D15 + Paclitaxel 60 mg/m ² , IV, D1,8,15	Q28 d x 4-6 cycles
Cisplatin 60-75 mg/m ² , IV,D15 + Gemcitabine 900-1000 mg/m ² , IV, D1,8,15	Q28 d x 4-6 cycles
Cisplatin 60-75 mg/m ² , IV, D1 + *Pemetrexed 500 mg/m ² , IV, D1	Q21 d x 4-6 cycles
Gefitinib 250 mg po qd (EGFR mutant)	Till PD or unacceptable toxicity
Erlotinib 150 mg po qd (EGFR mutant)	Till PD or unacceptable toxicity
Afatinib 40 mg po qd (EGFR mutant)	Till PD or unacceptable toxicity
Crizotinib 250 mg po bid (ALK rearrangement)	Till PD or unacceptable toxicity

若腎功能不佳，CCr < 60 ml/min，cisplatin 可以 carboplatin AUC 4-6 取代

若是 nonsquamous histology，沒有 bevacizumab 的 contraindication，platinum doublet 可以併用 bevacizumab

* 使用於不是 squamous cell carcinoma 組織學型態的病人

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一線的化學治療處方（年紀大，體能狀況不佳）

Published C/T Regimens	Schedule
Gefitinib 250 mg PO QD (EGFR mutant)	Till PD or unacceptable toxicity
Erlotinib 150 mg PO QD (EGFR mutant)	Till PD or unacceptable toxicity
Docetaxel 30 mg/m ² , IV, D1,8,15	Q28 d x 4-6 cycles
Paclitaxel 60 mg/m ² , IV, D1,8,15	Q28 d x 4-6 cycles
Gemcitabine 900-1000 mg/m ² , IV, D1,8,15	Q28 d x 4-6 cycles
Vinorelbine 25 mg/ m ² IV, D1,8,15	Q28 d x 4-6 cycles
Vinorelbine 60-75 mg/m ² , PO, D1,8	Q21 d x 4-6 cycles
Afatinib 40 mg po qd (EGFR mutant)	Till PD or unacceptable toxicity
Crizotinib (ALK rearrangement)	Till PD or unacceptable toxicity

* 一線，二線及二線之後的化學治療，術後輔助化學治療，依據病人年齡、性別、組織學型態、體能狀況、器官功能狀況、副作用的考量（血液學毒性、掉髮、皮疹、色素沈著、周邊神經病變等）、曾接受過的治療、病人的喜好、及分子生物標記來選擇病人的化學治療處方，給於客製化（personalized treatment）的治療。

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維持治療處方

Published C/T Regimens	Schedule
*Pemetrexed 500 mg/m ² IV D1	Q21 d Till PD or unacceptable toxicity
*Erlotinib 150 mg PO QD	Till PD or unacceptable toxicity
*Docetaxel 30 mg/m ² , IV, D1,8,15	Q28 d Till PD or unacceptable toxicity
#Gemcitabine 900-1000 mg/m ² , IV, D1,8,15	Q28d Till PD or unacceptable toxicity
#Bevacizumab 7.5 mg/kg IV q3w	Q21d Till PD or unacceptable toxicity
#Pemetrexed 500 mg/m ² IV + Bevacizumab 7.5 mg/kg IV	Q21d Till PD or unacceptable toxicity

#Continuous maintenance therapy：在沒有疾病惡化的情況下，一線化學治療 4-6 個療程後，持續使用一線化學治療配方中的一個藥物。使用於不是 squamous cell carcinoma 組織學型態的病人。

* Switch maintenance therapy：在沒有疾病惡化的情況下，一線化學治療 4-6 個療程後，使用與一線化學治療配方不同的藥物。

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二線及二線之後的化學治療處方

Published C/T Regimens	Schedule
Gefitinib 250 mg PO QD	Till PD or unacceptable toxicity
Erlotinib 150 mg PO QD	Till PD or unacceptable toxicity
*Ceritinib 750 mg po qd (ALK rearrangement)	Till PD or unacceptable toxicity
Docetaxel 30 mg/m ² , IV, D1,8,15	Q28 d x 4-6 cycles
#Pemetrexed 500 mg/m ² , IV, D1	Q21 d x 4-6 cycles
Paclitaxel 60 mg/m ² , IV, D1,8,15	Q28 d x 4-6 cycles
Gemcitabine 900-1000 mg/m ² , IV, D1,8,15	Q28 d x 4-6 cycles
Vinorelbine 25 mg/ m ² IV, D1,8,15	Q28 d x 4-6 cycles
Vinorelbine 60-75 mg/m ² , PO, D1,8	Q21 d x 4-6 cycles

* 一線 crizotinib 治療惡化或不耐受

* 一線，二線及二線之後的化學治療，術後輔助化學治療，依據分子生物標記、病人年齡、性別、組織學型態、體能狀況、器官功能狀況、副作用的考量（血液學毒性、掉髮、皮疹、色素沈著、周邊神經病變等）、曾接受過的治療、及病人的喜好來選擇病人的化學治療處方，給於客製化（personalized treatment）的治療。

使用於不是 squamous cell carcinoma 組織學型態的病人

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術前新輔助化學治療處方

Published C/T Regimens	Schedule
Cisplatin 60-75 mg/m ² , IV, D15 Vinorelbine 25 mg/m ² , IV , D1,8,15	Q28 d x 3-4 cycles
Cisplatin 60-75 mg/m ² , IV, D8 Vinorelbine 60-75 mg/m ² , PO, D1,8	Q21 d x 3-4 cycles
Cisplatin 60-75 mg/m ² , IV, D15 Docetaxel 30 mg/m ² , IV, D1,8,15	Q28 d x 3-4 cycles
Cisplatin 60-75 mg/m ² , IV, D15 Paclitaxel 60 mg/m ² , IV, D1,8,15	Q28 d x 3-4 cycles
Cisplatin 60-75 mg/m ² , IV, D15. Gemcitabine 900-1000 mg/m ² ,IV, D1,8,15.	Q28 d x 3-4 cycles
Cisplatin 60-75 mg/m ² , IV, D1 #Pemetrexed 500 mg/m ² ,IV, D1	Q21 d x 3-4 cycles

若腎功能不佳，CCr < 60 ml/min，cisplatin 可以 carboplatin AUC 4-6 取代

使用於不是 squamous cell carcinoma 組織學型態的病人

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術後輔助化學治療處方

Published C/T Regimens	Schedule
Cisplatin 60-75 mg/m ² , IV, D15 Vinorelbine 25 mg/m ² , IV, D1,8,15	Q28 d x 4 cycles
Cisplatin 60-75 mg/m ² , IV, D15 Vinorelbine 60-75 mg/m ² , PO, D1,8	Q21 d x 4 cycles
Cisplatin 60-75 mg/m ² , IV, D15 Docetaxel 30 mg/m ² , IV, D1,8,15	Q28 d x 4 cycles
Cisplatin 60-75 mg/m ² , IV, D15 Paclitaxel 60 mg/m ² , IV, D1,8,15	Q28 d x 4 cycles
Cisplatin 60-75 mg/m ² , IV, D15. Gemcitabine 900-1000 mg/m ² , IV, D1,8,15.	Q28 d x 4 cycles
Cisplatin 60-75 mg/m ² , IV, D1 #Pemetrexed 500 mg/m ² , IV, D1	Q21 d x 4 cycles
Tagafur/Uracil 300-500 mg PO QD *	Maintenance for 2 years

若腎功能不佳，CCr < 60 ml/min，cisplatin 可以 carboplatin AUC 4-6 取代

使用於不是 squamous cell carcinoma 組織學型態的病人

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同步化學治療放射線治療處方

Published C/T Regimens	Schedule
Cisplatin 50-60 mg/m ² , IV, D15 Vinorelbine 20-25 mg/m ² , IV, D1,8,15	Q28 d x 4 cycles
Cisplatin 50-60 mg/m ² , IV, D15 Docetaxel 20-25 mg/m ² , IV, D1,8,15	Q28 d x 4 cycles
Cisplatin 50-60 mg/m ² , IV, D15 Paclitaxel 45-50 mg/m ² , IV, D1,8,15	Q28 d x 4 cycles
Cisplatin 50-60 mg/m ² , IV, D1 #Pemetrexed 500 mg/m ² , IV, D1	Q21 d x 4 cycles

若腎功能不佳，CCr < 60 ml/min，cisplatin 可以 carboplatin AUC 4取代

使用於不是 squamous cell carcinoma 組織學型態的病人

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此版新增抗癌藥物停藥準則：

1. 病人拒絕。
2. 病況不宜：ECOG4。

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