

高雄榮民總醫院

胃癌診療指引

2022年02月22日 第一版

胃癌醫療團隊共同擬訂

注意事項：這個診療原則主要作為醫師和其他保健專家診療癌症病人參考之用。假如你是一個癌症病人，直接引用這個診療原則並不恰當，只有你的醫師才能決定給你最恰當的治療。

修訂指引

- 本共識參考國家衛生研究院於2012年1月出版之胃癌臨床指引、JGCA及其他參考文獻，於2022. 2. 22由胃癌團隊成員共同討論後修訂。

會議討論

上次會議：2021/03/09

本共識與上一版的差異

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2.原術前輔助化學治療處方有:XO、EOX、DOX、FLOT、FOLFOX。 Page 12	2.刪除術前輔助化學治療處方EOX。 Page 12
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4.原二線化療處方有:Irinotecan、Docetaxel、Paclitaxel、 Ramucirumab+Paclitaxel、mDCF、D-FOX、DOX。 Page 15-16	4.刪除二線化療處方mDCF。 Page 15
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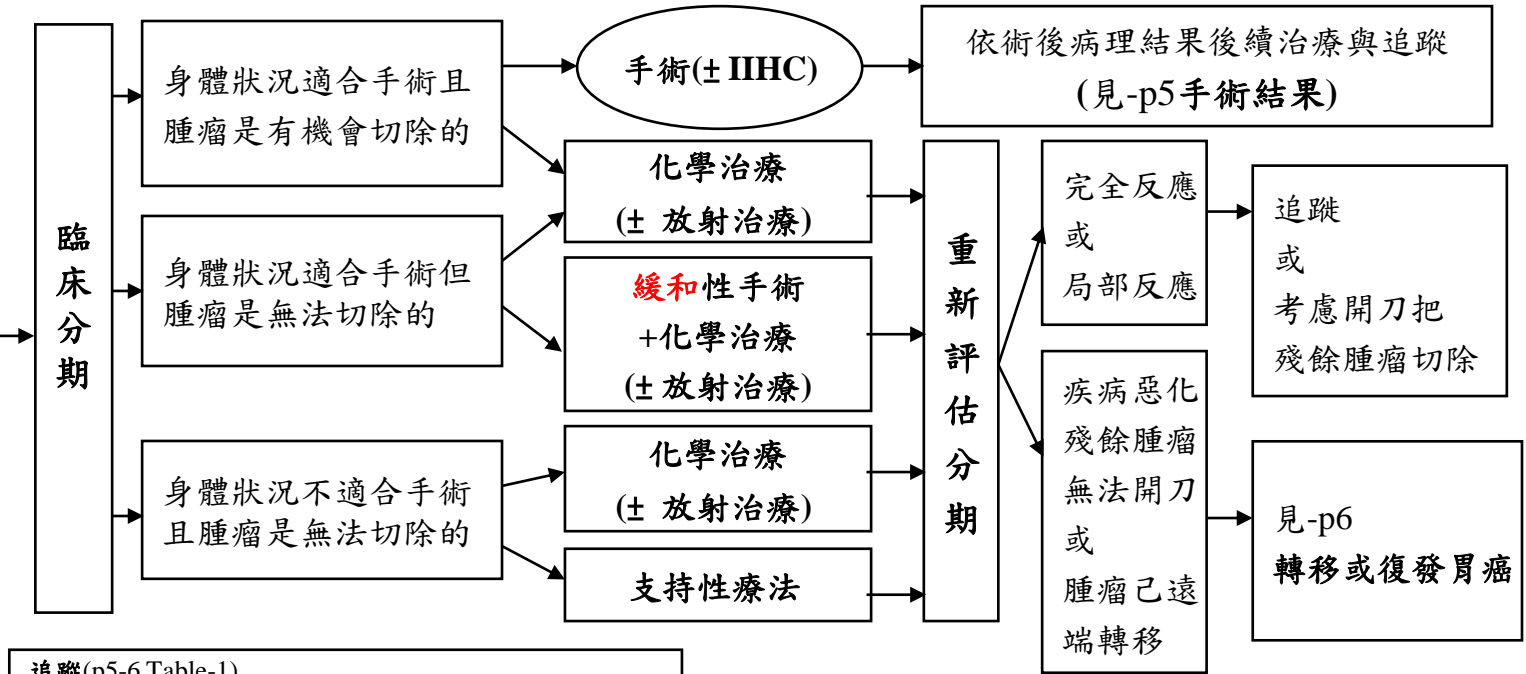
胃腺癌

高雄榮民總醫院 臨床診療指引

2022年第一版

評估	診斷	治療	追蹤
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- 病史、理學檢查
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 - 胸部X光
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-
- 必要時評估→
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-
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評估	診斷	治療	追蹤	
手術結果	R0切除	Tis, T1N0	※ GOT/GPT, ALP, Aib, CBC, CEA, CA199 Every 3 months for 2 years Every 6 months for 3-5 years then annually ※ CXR Every 6 months for 5 years then annually ※ Abdominal Sono Every 6 months for 5 years then as clinically indicated ※ Panendoscope Annually for 5 years then as clinically indicated ※ Abdominal CT Annually for 5 years then as clinically indicated	
		T2, T3, T4 或淋巴轉移		觀察或輔助性化學治療 (±放射治療)
	R1切除	化學治療 (±放射治療)		
	R2切除	化學治療 (±放射治療)		見-p6 轉移或復發胃癌
	遠端轉移			

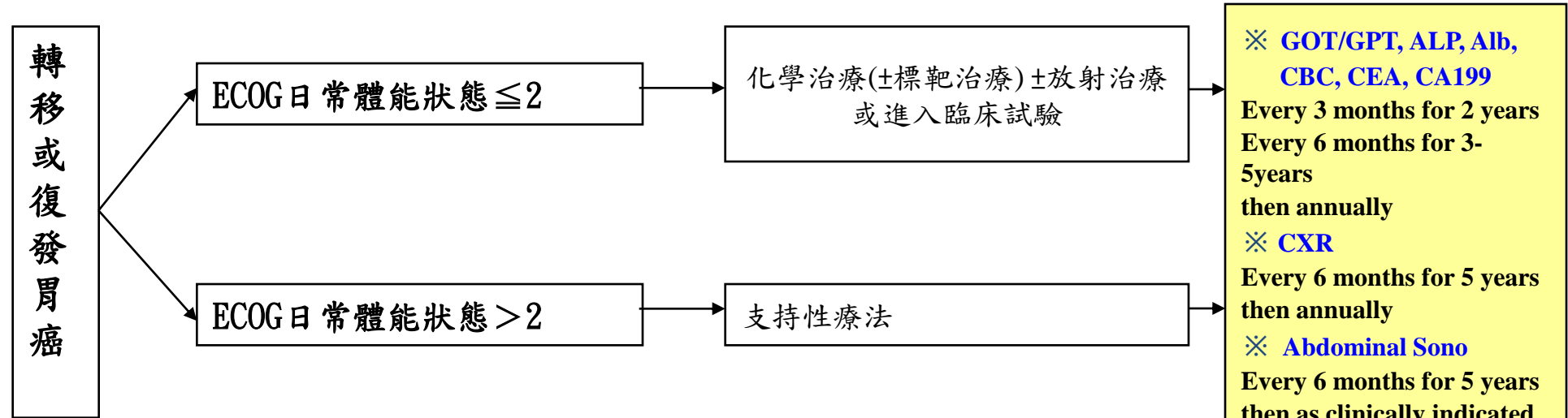
Table-1 術後追蹤建議表

胃腺癌

高雄榮民總醫院
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評估	診斷	治療	追蹤
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分數	ECOG
0	無症狀
1	有症狀，但可以正常活動，對生活無影響
2	可以照顧自己但無法工作，躺在床上的時間 < 50%的工作時間
3	躺在床上的時間 > 50%的工作時間
4	長期完全臥床
5	死亡

Table-2手術建議表(1)

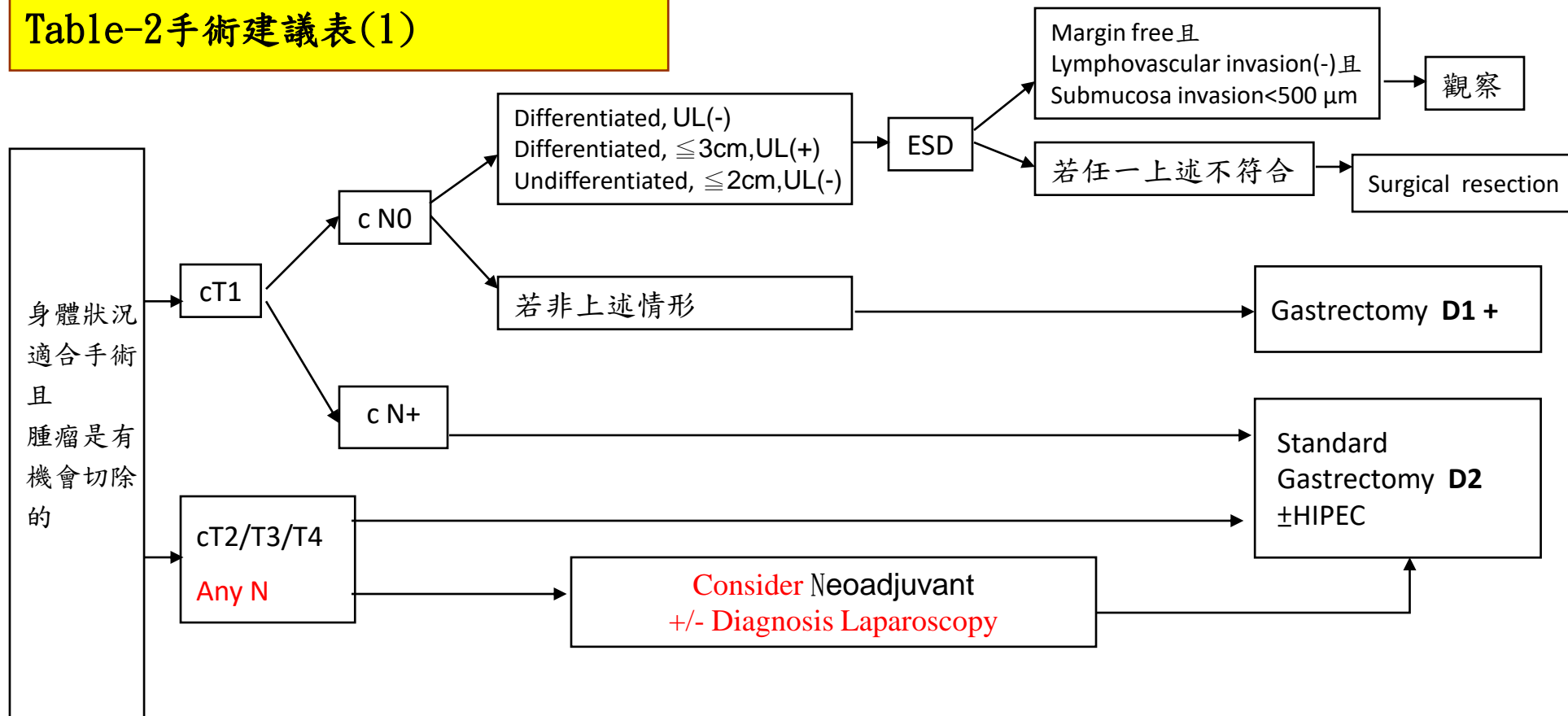


Table-2 手術建議表(2)

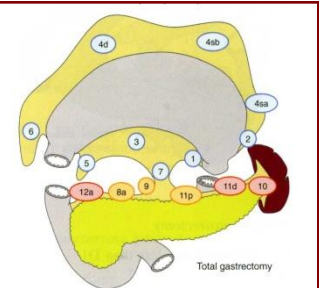
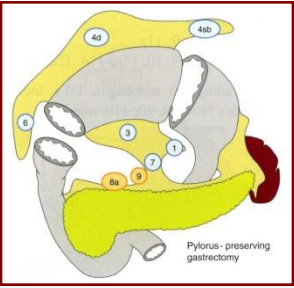
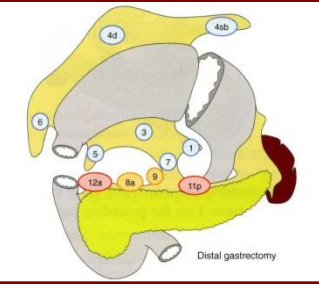
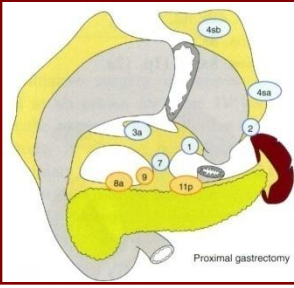
Type of Gastrectomy with lymph node dissection		
Gastrectomy	Extent of LN dissection	圖表
Total gastrectomy	D1 :Nos 1-7 D1+:D1+Nos 8a,9,11p D2 :D1+Nos 8a,9,10,11p,11d,12a For tumor invading the esophagus D1+Includes No,110 ¹ . D2 includes Nos.19,20,110,and 111	 
Distal gastrectomy	D1 :Nos 1,3,4sb,4d,5,6,7 D1+:D1+Nos 8a, 9 D2 :D1+Nos 8a,9,11p,12a	 
Pylorus-preserving gastrectomy	D1 :Nos 1,3,4sb,4d,6,7 D1+:D1+Nos 8a, 9	
Proximal gastrectomy	D1 :Nos 1,2,3a,4sa,4sb,7 D1+:D1+Nos 8a, 9,11p	

Table-3 IHC 適應症建議表

Hyperthermic IntraPeritoneal Chemotherapy (HIPEC)

※Indication : \geq T4a

※Regimen 1: (41-42°C for 20-60 minutes)

Cisplatin 90 mg 【IP-1】

Etoposide 90 mg

Mitomycin C 30 mg

Reference :No 4-7/strength of Evidence :Level I

※Regimen 2: (41-42°C for 20-60 minutes)

Paclitaxel 80mg/m² 【IP Paclitaxel, high dose】

Reference : No 28/strength of Evidence :Level IIB

Table-4.1 化學治療處方建議表：輔助化療

Adjuvant chemotherapy	Schedule	Reference (No)/ strength of Evidence
TS-1 40-60mg , po, bid (ACTS-GC trial) (po 4 weeks on, 2 weeks off/or po 2 weeks on, 1 weeks off) BSA >1.5m ² : 60mg bid; 1.25m ² -1.5m ² : 50mg bid; <1.25m ² : 40mg bid	Q42 d /cycle For 12 months	No.8 / Level I
UFUR 2#, po, bid (NSAS-GC trial)	For 16 months	No.9 / Level I
Oxaliplatin 130 mg/m ² , IV, D1 【XO】 (CLASSIC trial) Xeloda 2# po QAM, 3# po QPM (Day1-14) (825-1000mg/m ² /次)	Q21 d x 8-12cycles	No.10 / Level I
Oxaliplatin 100mg/m ² , IV, D1 【SOX】 TS-1 40-60mg , po , bid , D1~14 BSA >1.5m ² : 60mg/bid ; 1.25-1.5m ² : 50mg/bid ; <1.25m ² : 40mg/bid	TS-1(2 weeks on, 1 weeks off) →SOX Q21 d x 8 cycles	No.31 / Level II
Docetaxel 50mg/m ² , IV, D1 【DOX】 Oxaliplatin 100mg/m ² , IV, D1 Xeloda 1.25#/m ² (625mg/m ²), po, bid , D1~14	Q21d x 8 cycles	No.34 / Level IB

Table-4.1 化學治療處方建議表：輔助化療

Adjuvant chemotherapy	Schedule	Reference (No)/ strength of Evidence
Taxotere 50mg/m ² , IV, D1 【FLOT】 Oxaliplatin 85mg/m ² , IV, D1 Leucovorin 200mg/m ² , IV, D1 5-FU 2600mg/m ² , IV, D1	Q14d x 4-8 cycles 術前4cycles 術後4cycles	No.35 / Level I
Oxaliplatin 85mg/m ² , IV, D1 【FOLFOX】 Leucovorin 400mg/m ² , IV, D1 5-FU 400mg/m ² , IV, D1 , 5-FU 2400-3000mg/m ² , IV, D1-2	Q14d x 8-12cycles	No.36 / Level I
TS-1 + docetaxel *stage III 【DS】 Docetaxel 40mg/m ² , IV, D1 TS-1 80-120mg/day , po, bid , D1~14 BSA >1.5m ² : 60mg/bid ; 1.25- 1.5m ² : 50mg/bid ; <1.25m ² : 40mg/bid	Q21d x 8 cycles 1 st cycle TS-1 2 nd ~7 th TS-1+ docetaxel 8 th 起TS-1 up to 1year	No.37 / Level I

Table-4.2 化學治療處方建議表：術前輔助化療

Neoadjuvant chemotherapy	Schedule	Reference (No)/ strength of Evidence
Oxaliplatin 130 mg/m ² , IV,D1 【 XO 】 (CLASSIC trial) Xeloda 2# po QAM,3# po QPM (Day1-14) (825-1000mg/m ² /次)	Q21 d x 8-12cycles	No.10 / Level I
Docetaxel 50mg/m ² , IV, D1 【DOX】 Oxaliplatin 100mg/m ² , IV, D1 Xeloda 1.25#/m ² (625mg/m ²) PO, D1-14	Q21d x 2-4 cycles	No.34 / Level IB
Taxotere 50mg/m ² , IV, D1 【FLOT】 Oxaliplatin 85mg/m ² , IV, D1 Leucovorin 200mg/m ² , IV, D1 5-FU 2600mg/m ² , IV, D1	Q14d x 4-8 cycles 術前4cycles 術後4cycles	No.35 / Level I
Oxaliplatin 85mg/m ² , IV, D1 【FOLFOX】 Leucovorin 400mg/m ² , IV, D1 5-FU 400mg/m ² , IV, D1 , 5-FU 2400-3000mg/m ² , IV, D1-2	Q14d /cycle	No.36 / Level I

Table-4.3 化學治療處方建議表：轉移癌

Chemotherapy for unresectable/recurrent disease	Schedule	Reference (No)/ strength of Evidence
TS-1 40-60mg , po, bid (吃4周休2周或吃2周休1周) BSA $\geq 1.5\text{m}^2$: 60mg bid ; 1.25m^2 - 1.5m^2 : 50mg bid ; $<1.25\text{m}^2$: 40mg bid	Q42 d /cycle For 12 months	No.8 / Level I
UFUR 2# po bid	For 16 months	No.13 / Level I
Oxaliplatin 130 mg/m ² , IV,D1 【XO】 (CLASSIC trial) Xeloda 2# po QAM,3# po QPM (Day1-14) (825-1000mg/m ² /次)	Q21 d x 8- 12cycles	No.10 / Level I
Cisplatin 60-80 mg/m ² , IV, D1 【FP】 【FP-1】 5-FU 800-1000mg/m ² , IV, D1-5	Q21 d x 8-12cycles	No.15 / Level II

Table-4.3 化學治療處方建議表：轉移癌

Chemotherapy for unresectable/recurrent disease	Schedule	Reference (No)/ strength of Evidence
Docetaxel 50mg/m ² , IV, D1 【D-FOX】 Oxaliplatin 85mg/m ² , IV, D1 5-FU 1100mg/m ² , IV, D1-2	Q14d x 6-8 cycles /Until progression	No.30 /Level II
Docetaxel 50mg/m ² , IV, D1 【DOX】 Oxaliplatin 100mg/m ² , IV, D1 Xeloda 1.25#/m ² (625mg/m ²) po bid , D1-14	Q21d x 6-8 cycles /Until progression	No.34 /Level IB
Docetaxel 40mg/m ² , IV, D1 【DS】 TS-1 80-120mg/day , po , bid , D1~14	Q21d x 8 cycles/ Until progression	No.37 / Level I
Cisplatin 60mg/m ² , IV, D8 【SP】 TS-1 40-60mg/m ² , po , bid (吃3周休2周)	Q35day/cycle Until progression	No.40 / Level I

Table-4.4 化學治療（二線）處方建議表

Chemotherapy for unresectable/recurrent disease	Schedule	Reference (No)/ strength of Evidence
Irinotecan 150 mg/m ² , IV, D1	Q14d /cycle Until progression	No.20, 21 /Level I
Docetaxel 60 ~ 75 mg/m ² , IV, D1	Q21d /cycle Until progression	No.21, 22 /Level I
Paclitaxel 80 mg/m ² , IV, D1, D8, D15	Q28d/cycle Until progression	No.23 /Level I
Ramucirumab (8 mg/kg , IV, D1, D15) + Paclitaxel (80 mg/m ² , IV, D1, D8, D15)	Q28d/cycle Until progression	No. 25 /Level I
Docetaxel 50mg/m ² , IV , D1 【D-FOX】 Oxaliplatin 85mg/m ² , IV , D1 5-FU 1100mg/m ² , IV , D1	Q14d /cycle Until progression	No.30 /Level II

Table-4.4 化學治療（二線）處方建議表

Chemotherapy for unresectable/recurrent disease	Schedule	Reference (No)/ strength of Evidence
Docetaxel 50mg/m ² , IV, D1 【DOX】 Oxaliplatin 100mg/m ² , IV, D1 Xeloda 1.25#/m ² (625mg/m ²) PO, bid, D1-14	Q21d x 6-8 cycles /Until progression	No.34/Level IB

Table-4.5 化學治療（三線）處方建議表

Chemotherapy for unresectable/recurrent disease	Schedule	Reference (No)/ strength of Evidence
Oral Lonsurf 35 mg/m ² , po, bid (D1-5 & D8-12) 前2週服用5天休2天，後2週休息	Q28d/cycle /Until progression	No.38/ Level I

Table-4.6 化學治療（NIPS）處方建議表：

Chemotherapy for unresectable/recurrent disease	Schedule	Reference (No)/ strength of Evidence
Paclitaxel 20mg/m²/week 【IP Paclitaxel, low dose】	as clinically indicated	No 27/strength of Evidence :Level IIA

Table-5 標靶治療處方建議表

For unresectable/recurrent disease	Schedule	Reference (No)/ strength of Evidence
Trastuzumab 6-8mg/kg , IV, D1 使用條件： Her-2/neu免疫染色3+, 或2+且FISH positive for amplification	8 mg/kg loading dose, 6 mg/kg every 3 weeks Until progression	No 41 / Level I
Trastuzumab 6-8mg/kg ,IV ,D1 CDDP 80mg/m ² ,IV ,D1 / Carboplatin AUC4-6mg ,IV ,D1 Xeloda 1000mg/m ² PO,BID ,D1~14 / 5-FU 800mg/m ² ,IV ,D1~5 使用條件： Her-2/neu免疫染色3+, 或2+且FISH positive for amplification	8 mg/kg loading dose, 6 mg/kg every 3 weeks Until progression	No 16 / Level I
Ramucirumab 8 mg/kg, IV, D1	Q14d/cycle Until progression	No. 24 / Level I
Ramucirumab (8 mg/kg, IV, D1, D15) + Paclitaxel (80 mg/m ² , IV, D1, D8, D15)	Q28d/cycle Until progression	No. 25 /Level I

Table-6 免疫治療處方建議表

Nivolumab	3mg/kg	D1	Q2W	Until progression	(Ref. No 32/ Level II)
Pembrolizumab	200mg	D1	Q3W	Until progression	(Ref. No 33/ Level II)

Table-7 放射治療處方建議表

<p>※ Protocol of adjuvant chemoradiotherapy</p>	<p>※.For R0 resection \geq stage IIA ※ For R1 resection and R2 resection</p>
<p>Radiation therapy: Target volume: tumor/ gastric bed and pertinent nodal group Dose: 45-50.4 Gy /(1.8 Gy/day) Chemotherapy regimen: 5-FU (400 mg/m² per day) and leucovorin (20 mg/m² per day) on the first four and the last three days of RT. Reference :No 17/strength of Evidence :level 1</p>	
<p>※ Protocol of chemoradiation as the primary treatment</p>	<p>※ For medically fit patients but unresectable cancer without distant metastasis ※ For medically unfit patients without distant metastasis</p>
<p>Radiation therapy: Target volume: tumor/ gastric bed and pertinent nodal group Dose: 45-50.4 Gy /(1.8 Gy/day) Chemotherapy regimen: 5-FU (400 mg/m² per day) and leucovorin (20 mg/m² per day) on the first four and the last three days of RT. Reference :No 17/strength of Evidence :level 1</p>	

Table-8 癌症藥物停藥準則

影像學檢查，腫瘤有變大或轉移變多，應停止或改變治療方式。

Reference

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