

Carboplatin AUC 10

Information for patients at Mount Vernon Cancer Centre (MVCC)

Your oncologist has explained that you have a type of cancer called a seminoma, which has spread beyond the testis. The treatment for patients with this type of cancer has a very high chance of success.

There are different options available that your oncologist will have discussed with you.

These are:

- chemotherapy: This is the usual treatment if the tumour has spread beyond the testes
- radiotherapy: This is only suitable for patients with a small lump (mass)

The standard chemotherapy is either:

- three cycles of BEP (bleomycin, etoposide and cisplatin)

or

- four cycles of EP (etoposide and cisplatin)

You will be admitted to hospital for three to five days for each cycle of these treatments.

Side effects

The possible side effects from the chemotherapy include nausea, hair loss, reduced immunity, fatigue and infertility.

A small number of patients may experience some long term side effects. These include numbness in fingers or feet, high pitch hearing loss, buzzing in their ears (tinnitus), kidney damage, lung damage and very rarely a second cancer.

Carboplatin

Because of these side effects another drug called carboplatin is being studied and used in trials with patients.

Carboplatin is given intravenously over one hour as an outpatient. Patients usually cope better with this treatment than with cisplatin. It does cause a larger drop in the platelet count, which could slightly increase the risk of bleeding. It can also reduce your immunity, but it has fewer long term side effects than BEP or EP.

The studies done in the 1980's using carboplatin and etoposide showed a higher relapse rate than was seen with BEP (which uses cisplatin).

In these studies it was found that the **combination** of carboplatin with etoposide caused a big drop in blood count. The doses of the drugs therefore had to be reduced.

Carboplatin AUC 10

Since 2004 at St Bartholomew's and Mount Vernon Hospitals a higher dose of carboplatin (carboplatin AUC 10) alone has been used. This has been specially calculated for each patient. The results from this are very positive with a high cure rate.

Even at this higher dose, patients are able to cope with having carboplatin, and so far no long term side effects have been reported.

These most recent results suggest that carboplatin AUC 10 is as good as 3 cycles of BEP or 4 cycles of EP.

However at the moment this treatment is not included in the national guidance for this group of patients. This is because there is not enough data from the patient trials held so far.

This means that it is not yet accepted as a standard treatment. Further trials are being carried out to check these findings and it is very likely that this will be a standard treatment option in the future.

(continued overleaf)

In summary the most recent data from the research tells us that having carboplatin AUC 10 will give you the same chance of cure and a reduced chance of the long term side effects, as having the standard treatments of either BEP or EP.

It is important that you understand the treatment options that we have discussed before you consent to having your treatment.

If you would prefer to have either of the current national standard treatments (BEP or EP), or you wish to discuss the options further, please ask Dr Sharma or any of the team for more information.