Darbepoetin Treatment Algorithm for Chemotherapy-Induced Anemia

Adapted from US Oncology Courtesy of T. Mays PharmD, CANCER THERAPY AND RESEARCH CENTER San Antonio, Texas

Baseline Hbg < 11 g/dL or HCT < 33%

Treat with darbepoetin 200 mcg every 2 weeks

After 4 weeks of treatment, if Hgb rise < 1 g/dL over baseline, increase darbepoetin to 300 mcg QOW. Check iron & treat if needed.*

If no Hgb rise > 1 g/dL after 8 weeks of treatment, discontinue darbepoetin. Anemia considered non-responsive. Consider other causes of anemia.**

Discontinue darbepoetin upon resolution of symptoms of anemia (Durable Hgb > 12) and completion of chemotherapy.

Baseline Hbg > 11 g/dL or HCT > 33%

Monitor Hbg and HCT

After 4 weeks if Hgb rise > 1 g/dL over baseline, continue current darbepoetin dose

If Hgb > 12 g/dL decrease frequency of dosing from QOW to Q3W or decrease dose. If patient maintains counts for an additional month, consider discontinuing therapy. If Hgb drops to < 12 gm/dL, restart at 75% of original dose.

Decrease dose at doctor’s discretion if there is an increase in Hgb of > 1.3 g/dL in a two week period.

*Check transferrin (goal: > 100 ng/dL) or ferritin (goal > 20%)
** Consider infection, inflammation, iron, B12, or folate deficiency, occult blood loss, NSAID use, and underlying hematologic disease.