Low dose Melphalan for elderly patients with MDS or AML

Indication: Elderly patients with hypercellular MDS (intermediate 2 or high risk) or AML

Regimen details: Melphalan 2mg orally daily

Administration: Orally

Premedication: None required.

Frequency: Continuous, until complete peripheral response or evidence of treatment failure (normally a minimum of 4 weeks up to a maximum 16 weeks).

Extravasation: Not applicable

Anti-emetics: None required

Supportive medication: Allopurinol 100 - 300 mg od (dependent on renal function)

Regular investigations: FBC, frequency determined by Consultant.

Dose Modifications

Haematological Toxicity due to treatment: Myelosuppression.

Renal Impairment: No dose modification is necessary.

Hepatic Impairment: No dose modification is necessary.

Toxicities: Myelosuppression

Drug interactions: Not applicable