



Research Article

Comparison of Hematological Toxicity Between Cisplatin-5-Fluorouracil and Gemcitabine-cisplatin used in Treatment of Gallbladder Cancer

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Abstract

The occurrence of gallbladder cancer rare in United States and other western countries is increases. In fact, more than half of those patients die. Many patients do not receive palliative chemotherapy or adequate therapy. The question of whether a combined chemotherapy is better than a single drug-like gemcitabine. The objective of this prospective study was to compare the haematological toxicity between cisplatin-5-fluorouracil and gemcitabine-cisplatin used in treatment of gallbladder cancer at Mahavir Cancer Institute and Research Centre Phulwari Sharif Patna, Bihar. Toxicities were graded as per the National Cancer Institute Common Toxicity Criteria (NCI-CTC), grade I, II, III and IV. Anaemia of grade III-IV was observed 11% and 7% respectively of cycles of chemotherapy in cisplatin-5-fluorouracil, while in cisplatin-gemcitabine observe 13% and 4% respectively. Grade III-IV thrombocytopenia was more frequently in the cisplatin-5-fluorouracil chemotherapy cycle (2% & 1.3% respectively) compared with the cisplatin-gemcitabine (2.6% and 0% respectively). Grade III-IV neutropenia also occurred more frequently in cisplatin-5-fluorouracil (5.3% and 5.3% respectively) than in the cisplatin-gemcitabine respectively. However, the lack of statistical significance results in the present study may be due to inadequate sample size (8 in each Arm). As far as safety is concerned, cisplatin-5-fluorouracil seems to be safer than cisplatin-gemcitabine.

Keywords: Ketorolac Tromethamine, Solid Dispersion, Surfactants and Carriers.

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