



Palliative Neuroendocrine Tumor Regimens

The following table lists the evidence-informed regimens (both IV and non-IV) for neuroendocrine tumor used in the palliative setting. It is expected that the prescribing oncologist will select the regimen from the list of evidence-informed regimens that is most appropriate for their patient taking account of a variety of disease-specific and patient-related factors.

Regimens highlighted in red contain an expensive drug that is not currently publicly funded for the regimen and treatment intent.

Neuroendocrine Tumor	
Regimen Code	Regimen Abstract
DCRBEPFRFU	Dacarbazine 200 mg/m ² IV days 1-3; EPIrubicin 30 mg/m ² IV days 1-3; Fluorouracil 500 mg/m ² IV days 1-3. Q21 days
EVER	Everolimus 10 mg PO daily
FUSTRE	Fluorouracil 400 mg/m ² IV days 1-5; Streptozocin 500 mg/m ² IV days 1-5. Q42 days
OCTR	Octreotide 50-100 mcg SC BID - TID. THEN Octreotide 10-30 mg IM day 1. Q28 days
TMZL	<i>Patients without prior chemotherapy:</i> Temozolomide 200 mg/m² PO daily, days 1-5 – Not currently publicly funded for this regimen and intent Q28 days <i>Patients with prior chemotherapy:</i> Temozolomide 150 mg/m² PO daily, days 1-5 – Not currently publicly funded for this regimen and intent Q28 days

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