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Title : AMBULATORY HIGH DOSE METHOTREXATE ADMINISTRATION : EXPERIENCE OF THE PEDIATRIC SERVICE OF HEMATOLOGY AND ONCOLOGY (PSHO) OF RABAT.

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Abstract :

Background/ Objectives: Childs cancers are very rare (1 to 3% of human cancers). Significant therapeutic advances are currently achieving a cure of nearly 4 out of 5 children, and chemotherapy is an important component. Some therapeutic combinations lend themselves to ambulatory use, but this is done at the cost of rigorous monitoring. Of these molecules, methotrexate (MTX) is a part, and is used in high doses (HD).

Our objective was to take stock of the use of ambulatory HDMTX in PSHO of Rabat by reporting their experience in this matter, while answering the question of feasibility and suggest the improvements to be made in order to extend the experience to other pilot units of the GFAOP.

Methods: This was an observational study from February 10 to May 30, 2016 and for any patient admitted for an HDMTX cure.

Results: 30 cases of administration of HDMTX on 915 ambulatory chemotherapy (frequency: 3.27%) and a sex ratio of 1.33. The average age of the patients was 7 years. The underlying pathologies were mainly cases of leukemias, non-Hodgkin's lymphomas. The mean total dose of HDMTX administered was 4 g and the mean dose of folinic acid was 12.96 mg/6 h. The mean urine pH during HDMTX administration was 8 (22/30 cases). Diuresis was not systematically quantified. IV hydration was standard by weight, combined with oral hydration. There were no major side effects.

Conclusion: Ambulatory HDMTX administration is done at the PSHO of Rabat, especially for LAL and NHL. The follow-up of 30 cases of HDMTX at Rabat, without methotrexate dosage possibility, and without major incidents was a reality. A better monitoring of the parameters (diuresis, urine pH, hydration) would "guarantee" more safety of use; for the benefit of the patient, the family and the nursing staff.