

常用化療劑量

以Cockcroft-Gault計算Ccr(ml/min)時, creatinine最小值為0.7, 否則會高估肌酐廓清率(Ccr)

Intrathecal therapy (IT)				
TIT	Solu-cortef MTX Ara-C	50 mg (or 100mg) 12 mg 40 mg	(國外用 prednisolone 40mg) (國外用MTX 15mg)	特殊: - 可能omit Ara-C -VS黃懷萱: 12.5mg(¼ amp)
IT Rituximab	Rituximab 1mL=10mg (100mg/10mL; 500mg/50mL)	25 or 30 mg	in preservative-free normal saline 6ml, IT 5min	和systemic rituximab同一 天打, 註明其餘用於IF

Hodgkin Lymphoma (HL)				
ABVD	Doxorubicin Bleomycin Vinblastine Dacarbazine	25 mg/m ² 10 mg/m ² 6 mg/m ² 375 mg/m ²	D1, D15 D1, D15 D1, D15 D1, D15	因為有 Bleomycin(lung fibrosis), 不可同日 使用G-CSF, 療程 中也盡量避免
BEACOPP (括號內為 escalated劑量)	Bleomycin Etoposide(esc) Doxorubicin(esc) Cyclophosphamide Vincristine Procarbazine 台灣沒有 Prednisone	10 mg/m ² 100(200) mg/m ² 25(35) mg/m ² 650(1250) mg/m ² 1.4 mg/m ² 100 mg/m ² (PO) 40 mg/m ² /day	D8 D1-D3 D1 D1 D8 D1-D7 D1-D14	若ABVD C2後反應 不好, 建議改打” escalated” BEACOPP Central line highly recommended
BEACOPDac (modified from escalated BEACOPP)	Bleomycin Etoposide Doxorubicin Cyclophosphamide Vincristine Dacarbazine Prednisone	10 mg/m ² 200 mg/m ² 35 mg/m ² 1250 mg/m ² 1.4 mg/m ² 200-250 mg/m² 40 mg/m ² /day	D8 D1-D3 D1 D1 D8 D2-D3 D1-D14	Advised from GHSG: B. von Tresckow 比正版esc BEACOPP輕鬆。 可以在OPD打, 但 也有可能FN 參考來源1,2 : 建議 搭配D9 G-CSF, Valtrex, Baktar Cycle length: 21 d

BrECADD	Brentuximab Etoposide Cyclophosphamide Doxorubicin Dacarbazine Dexamethasone	1.8 mg/kg 150 mg/m ² 1250 mg/m ² 40 mg/m ² 250 mg/m ² 40 mg	D1 D2-4 D2 D2 D3-4 D2-5	效果同BEACOPP Lancet Oncol . 2017 Dec;18(12):1680- 1687
BeGEV	Bendamustine Gemcitabine Vinorelbine Prednisolone	90 mg/m ² 800 mg/m ² 20 mg/m ² 100 mg/d	D2, D3 D1, D4 D1 D1-D4	Cycle length: 21 day Need G-CSF D+7起G-CSF可收血 球 CR(73%), PR(10%) J Clin Oncol . 2016 Sep 20;34(27):3293-9. .
Pembrolizumab	Pembrolizumab	200 mg	D1	Q3W
Nivolumab	Nivolumab	40 mg or 3 mg/kg	D1	Q2W Lancet Oncol . 2016 Sep;17(9):1283-94
Brentuximab + Nivolumab	Brentuximab Nivolumab	1.8 mg/kg 3 mg/kg	D1 D1	Q3W 3-year PFS 77% Blood . 2021 Aug 12;138(6):427-438
Brentuximab consolidation after auto-HSCT	Brentuximab	1.8 mg/kg	Q3W	Total 16 cycles. Starting from 30-45 days after auto-HSCT. AETHERA trial: 5-y PFS 59% vs 41%
Brentuximab + AVD	Brentuximab Doxorubicin Vinblastine Dacarbazine	1.2 mg/kg 25 mg/m ² 6 mg/m ² 375 mg/m ²	D1, D15 D1, D15 D1, D15 D1, D15	Q4W
Nivo + AVD	Nivolumab Doxorubicin Vinblastine Dacarbazine	40 or 240 mg 25 mg/m ² 6 mg/m ² 375 mg/m ²	Q2W	Alex Francisco Herrera et al., SWOG S1826, a randomized study of ivolumab(N)-AVD versus brentuximab

				vedotin(BV)-AVD in advanced stage (AS) classic Hodgkin lymphoma (HL)..JCO 41, LBA4-LBA4(2023)
Non-Hodgkin's Lymphoma (NHL)				
R-CHOP (or R-CNOP)	R ituximab C yclophosphamide Doxorubicin(H ydroxydaurorubicin) (or Mitoxantrone) Vincristine(Q ncovin®) P rednisolone	375 mg/m ² 750 mg/m ² 50 mg/m ² (12 mg/m ²) 2 mg 60 mg/m ² /day	D0 D1 D1 D1 D1 D1-D5	Cycle length: 21
R-CEOP	R ituximab C yclophosphamide E toposide (IF) Vincristine(Q ncovin®) P rednisolone E toposide (PO)	375 mg/m ² 750 mg/m ² 50 mg/m ² 2(1.4mg/m ²) mg 60 mg/m ² /day 100 mg/m ²	D0 D1 D1 D1 D1-D5 D2-3	Cycle length: 21
R-GDP	R ituximab Gemcitabine Dexamethasone Cisplatin (Carboplatin)	375 mg/m ² 1000 mg/m ² 20 mg BID 75 mg/m ² (AUC=5)	D1 (化療前) D1, D8 D1-D4 D1 D1	比R-DHAP毒性低
R-DHAP	R ituximab D examethasone H igh dose A ra-C C isplatin	375 mg/m ² 40mg 2000 mg/m ² Q12H 100 mg/m ²	D1 (化療前) D1-D4 D2 (共4000) D1	Steroid D1在R前打。D2分2次20mg在Ara-C前打。 腎毒性Gr3-4約有11% 。 若要收血球G-CSF Day 6起打。PBSCH since D10, 11
Modified DHAP	D examethasone H igh dose A ra-C C isplatin	40mg IV/PO 2000 mg/m ² Q12H 25 mg/m ² cIF	D1-D4 D2 (共4000) D1-D4	Cisplatin改25 mg/m ² x 4 d。使得腎毒性減少(Gr 3-4 creatinine上升只有2.2%)。若要收血球G-CSF Day 7起打。PBSCH since D10, 11。 原始文章無收錄CNS lymphoma病人，Ara-C劑量分成0.5g Q12H x 4天給，CNS劑量可能不

				<p>夠。在此維持原始DHAP的2g Q12H x 1 day。</p> <p>參考自J Cancer Res Clin Oncol . 2019 Dec;145(12):3067-3073</p>																																												
VR-DHAP	<p>Bortezomib, V</p> <p>Rituximab</p> <p>Dexamethasone</p> <p>High dose Ara-C</p> <p>Cisplatin</p>	<p>1.3 mg/m²</p> <p>375 mg/m²</p> <p>40mg</p> <p>2000 mg/m² Q12H</p> <p>100 mg/m²</p>	<p>D1,4,8,11</p> <p>D1 (化療前)</p> <p>D1-D4</p> <p>D2 (共4000)</p> <p>D1</p>	<p>若Plt < 50k, 肝功能異常, 可考慮Bortezomib只給D1,4</p> <p>Steroid D1在R前打。D2分2次20mg在Ara-C前打。</p> <p>若要收血球G-CSF Day 6起打。PBSC since D10, 11</p>																																												
EPOCH (or EPOCHN)	<p>Etoposide</p> <p>Prednisolone</p> <p>Vincristine</p> <p>Cyclophosphamide</p> <p>Doxorubicin</p> <p>(or Mitoxantron)</p>	<p>50 mg/m²</p> <p>60 mg/m² /day</p> <p>0.5 mg</p> <p>750 mg/m²</p> <p>10 mg/m²</p> <p>3 mg/m²</p>	<p>D1-D4</p> <p>D1-D6</p> <p>D1-D4</p> <p>D5</p> <p>D1-D4</p>																																													
Dose adjusted-EPOCH (or EPOCHN)	<p>Etoposide</p> <p>Prednisolone</p> <p>Vincristine</p> <p>Doxorubicin</p> <p>(or Mitoxantron)</p> <p>Cyclophosphamide</p> <p>G-CSF</p>	<p>50 mg/m² (混合cIF)</p> <p>60 mg/m² BID (台大打60 QD!)</p> <p>0.5 mg (0.4 mg/m², 混合cIF)</p> <p>10 mg/m² (混合cIF)</p> <p>3 mg/m²</p> <p>750 mg/m²</p> <p>5 ug/kg</p>	<p>D1-D4</p> <p>D1-D5</p> <p>D1-D4</p> <p>D1-D4</p> <p>D5</p> <p>D6-</p>	<p>Etoposide, Vincristine, Doxorubicin泡在一起用CVC給</p> <p>(Cyclophosphamide最後給)</p> <p>Prophylaxis: PPI, Baktar, Laxatives</p> <p>N Engl J Med . 2013 11;368(15):1408-16</p>																																												
	<p>劑量調整原則：</p> <ul style="list-style-type: none"> ● 從Level 1開始 ● 若Nadir ANC ≥ 500, 上調一級劑量(20%) ● 若1-2次抽血Nadir ANC ≤ 500, 維持上次劑量 ● 若Nadir Plt ≤ 25000, 或是3次以上抽血Nadir ANC ≤ 500, 減少一級劑量 ● 原始study大部分會用到Level 4 ● If diameter reduction > 20% between C4 and C6: treat 6 cycles ● If diameter reduction < 20% between C4 and C6: treat 8 cycles 	<table border="1"> <thead> <tr> <th rowspan="2">Drugs</th> <th colspan="8">Drug Doses per Dose Levels</th> </tr> <tr> <th>-2</th> <th>-1</th> <th>1</th> <th>2</th> <th>3</th> <th>4</th> <th>5</th> <th>6</th> </tr> </thead> <tbody> <tr> <td>Doxorubicin (mg/m²/day)</td> <td>10</td> <td>10</td> <td>10</td> <td>12</td> <td>14.4</td> <td>17.3</td> <td>20.7</td> <td>24.8</td> </tr> <tr> <td>Etoposide (mg/m²/day)</td> <td>50</td> <td>50</td> <td>50</td> <td>60</td> <td>72</td> <td>86.4</td> <td>103.7</td> <td>124.4</td> </tr> <tr> <td>Cyclophosphamide (mg/m²/day)</td> <td>480</td> <td>600</td> <td>750</td> <td>900</td> <td>1080</td> <td>1296</td> <td>1555</td> <td>1866</td> </tr> </tbody> </table>			Drugs	Drug Doses per Dose Levels								-2	-1	1	2	3	4	5	6	Doxorubicin (mg/m ² /day)	10	10	10	12	14.4	17.3	20.7	24.8	Etoposide (mg/m ² /day)	50	50	50	60	72	86.4	103.7	124.4	Cyclophosphamide (mg/m ² /day)	480	600	750	900	1080	1296	1555	1866
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	<p>Figure S3. Drug Dose Levels. The drug dose escalation for doxorubicin, etoposide and cyclophosphamide are shown for each dose level. The doses are escalated 20% above the last cycle. The dose 20% dose escalation is based on the previous doses (i.e. compounded dose escalation). Only cyclophosphamide is adjusted when reducing below level 1.</p>																																															

ESHAP	Etoposide Methylprednisolone Ara-C Cisplatin	40 mg/m ² 280 mg 2000 mg/m ² 25 mg/m ²	D1-D4 D1-D5 D5 D1-D4	<u>E</u> toposide <u>S</u> olu-Medrol <u>H</u> igh-dose <u>A</u> ra-C <u>C</u> is <u>P</u> latin
BOMES	BiCNU Vincristine Methotrexate Etoposide Methylprednisolone	65 mg/m ² 2 mg 1500 mg/m ² 50 mg/m ² 200 mg	D1-D2 D1, D8 D7 or D8 or D15 D1-D5 D1-D7	MTX D1 infusion 24 hours -> D3 AM 05:00 開始Rescue MTX D1 infusion 6 hours -> D2 PM 17:00 開始Rescue
FND	Fludarabine Mitoxantrone Dexamethasone	25 mg/m ² 10 mg/m ² 20 mg/m ² /day	D1-D3 D1 D1-D5	
HDMTX	Methotrexate	8000 mg/m ² (6hr)	D1	MTX 勿和PPI, penicillin併用, 若 有effusion請先抽 乾 MTX D1 infusion 6 hours -> D2 PM 17:00 開始Rescue
R-HDMTX-Ara-C + ASCT (PCNSL)	Rituximab Methotrexate Cytarabine -- Busulfan Thiotepa	375 mg/m ² 3.5 g/m ² 2 g/m ² BID -- 3.2 mg/kg IV 5 mg/kg	D0, D4 D1 D2, D3 -- D-7, D-6 D-5, D-4	Cycle length: 21 days PBSCH after C1 2-year PFS/OS 93% Blood Adv (2020) 4 (14): 3378–3381
MT-R x 4 -- then -- EA (consolidation) x 1 (PCNSL)	Rituximab Methotrexate Temozolomide -- Etoposide Cytarabine	375 mg/m ² 8 g/m ² 150 mg/m ² PO (奇數cycle才吃) -- 10 mg/kg clF QD (共40mg/kg) 2 g/m ² Q12H (共16 g/m ²)	D3 (C1-C6 only) D1 D7-D11 -- D1-D4 D1-D4	Cycle length: 14 days. Prophylaxis: Steroid eye drops, G-CSF, FQ, azole, Valtrex, Baktar CR(66%), 2-y-PFS(57%) J Clin Oncol . 2013 Sep 1;31(25):3061-8
CyVE (< 60 y/o) (R/R PCNSL)	Ara-C (Cytarabine) Ara-C (Cytarabine) Etoposide	50 mg/m ² (12 hours) 2000 mg/m ² (3 hours) 200 mg/m ² (2 hours)	D1-D5(台大沒打) D2-D5 D2-D5	Less neurotoxicity 100% ORR, 71% CR Cycle length: 28 D 可接PBSCH, G-CSF 5ug/kg/day since D7

CyVE (> 60 y/o) (R/R PCNSL)	Ara-C (Cytarabine) Ara-C (Cytarabine) Etoposide	50 mg/m ² (12 hours) 2000 mg/m ² (3 hours) 150 mg/m ² (2 hours)	D1-D5(台大沒打) D2-D4 D2-D5	ASCT用Thiotepa-BuCy (Nadir 14 d. 台大套餐打的比這裡寫的弱) Soussain C et al, J. Clin. Oncol. 2008
HDMA	Methotrexate Ara-C --(若要PBSCH)-- G-CSF (Monitor HPC)	3500 mg/m ² (6hr) 3000 mg/m ² --(若要PBSCH)-- 10 ug/kg/day	D1 D4-D5 D6起 QN D15起	Transfusion. 2014 Mar;54(3):509-15. MTX勿和PPI, penicillin併用, 若有effusion請先抽乾
R-BAC	Rituximab Bendamustine Ara-C	375 mg/m ² 70 mg/m ² 800 mg/m ²	D0 D1-D2 D1-D3	用於Mantle 2 y PFS: 70-95% Cycle length: 28 D 4-6 cycles 要打G-CSF, FN 12%
BAS	BCNU Ara-C Methylprednisolone	65 mg/m ² 2000 mg/m ² 200 mg	D1, D2 D3 D1-D5	蔡oo貴用這個打 BNS
R-Temozolomide	Rituximab Temozolomide	375 mg/m ² 150 mg/m ²	D1 D1-D5	Every 28 days ORR 26% (6/23) Eur J Cancer . 2004 Jul;40(11):1682-8
R-HDAC (PBSCH) + R-TBC (ASCT) (PCNSL)	Rituximab Cytarabine -- Rituximab Thiotepa Busulfan Cyclophosphamide Mesna	1000 mg/m ² 3000 mg/m ² Q12H (4 doses) -- 1000 mg/m ² 200-250 mg/m ² 0.8 mg/kg Q6H or 2.7 mg/kg QD 60 mg/kg 15 mg/kg Q6H	D1, D8 D1, D2 -- D-9, D-2 D-9 to D-7 D-6 to D-4 D-3 to D-2 D-3 to D-2	R-TBC: Age > 60 則 Busulfan改為0.6 mg/kg Q6H.(Kate Oxynasarski建議60 歲以上不要打TBC) Cancer. 2015 Jan 15;121(2):226-33 Ann Hematol.2025 Jul;104(7):3843-385 4
TT-BCNU (ASCT) (PCNSL)	Thiotepa BCNU	5 mg/kg 400 mg/m ²	D-6, D-5 D-4	JAMA Oncol. 2021 Jul 1;7(7):993-1003 (Kate Oxynasarski建 議TT要用更大的劑 量如 10-20 mg/kg)
Non-Hodgkin's Lymphoma (NHL) (Continued)				
Chlorambucil (regular dose)	Chlorambucil (2mg/tab)	吃法1: 6 mg/m ² 吃法2: 10-12 mg/m ²	D1-D14 D1-D7	Cycle length: 28 days

		吃法3: 10 mg/day	QD Until CR + 3m	可搭類固醇(0.5 mg/kg/day) or Rituximab
Chlorambucil (pulse)	Chlorambucil (2mg/tab)	16 mg/m ²	D1-D5	Cycle length: 28 days 可搭類固醇 or Rituximab
FCR (< 60 y/o)	Rituximab Rituximab Fludarabin Cyclophosphamide	375 mg/m ² 500 mg/m ² 25 mg/m ² /day 250 mg/m ² /day	D0 (C1) D0 (C2-C6) D1-D3 D1-D3	Cycle length: 28 days Grade III-IV Neutropenia(52%) Rituximab maintenance 500 mg/m ² Q3M
FCR-Lite J Clin Oncol. 2009 Feb 1;27(4):498-503	Rituximab Rituximab Fludarabin Cyclophosphamide	375 mg/m ² 500 mg/m ² 20 mg/m ² /day 150 mg/m ² /day	D0 (C1) D0, D14 (C2-C6) D1-D3 D1-D3	Cycle length: 28 days Grade III-IV Neutropenia(13%) Rituximab maintenance 500 mg/m ² Q3M
R-BACOD-m	Rituximab Bleomycin Adriamycin Cyclophosphamide Vincristine Dexamethasone Methotrexate	375 mg/m ² 4 mg/m ² 45 mg/m ² 600 mg/m ² 2 mg 6 mg/m ² 200 mg/m ²	D0 D1 D1 D1 D1 D1-D5 D8, D15	
R-CODOX-M	Rituximab Cyclophosphamide Vincristine Doxorubicin Methotrexate	375 mg/m ² 800 mg/m ² 200 mg/m ² 2 mg 40 mg/m ² 3000 mg/m ² IF 24 hours	D0 D1 D2-D5 D1, D8 D1 D10	2010年後打3g/m2
R-IVAC	Rituximab Ifosfamide Etoposide Cytarabine	375 mg/m ² 1500 mg/m ² QD 60 mg/m ² QD 2000 mg/m ² BID	D0 D1-D5 D1-D5 D1-D2	

R-ICE	Rituximab Ifosfamide Mesna (mix with ifosfamide) Carboplatin Etoposide	375 mg/m ² 5000 mg/m ² cIF 24 hours 5000 mg/m ² cIF 24 hours AUC= 5 100 mg/m ²	D0 D2 D2 D2 D1-D3	Carboplatin劑量以 Calvert formula計 算= Target AUC * (Ccr+25). Max: 750 mg/cycle
Waldenström macroglobulinemia (WM)				
BDR ORR(85%), CR(3%), PR(58%) 7-year OS(66%)	Bortezomib(C1) Bortezomib(C2-5) Dexamethasone Rituximab	1.3 mg/m ² IV (原始文章IV use) 1.6 mg/m ² IV 40 mg/cycle 375 mg/m ² /cycle	D1,4,8,11 D1,8,15,22 D1 D1	Cycle length: 21 days (C1), 35 days (C2-C5) Blood (2017) 129 (4): 456-459
Benda-R	Rituximab Bendamustine	375 mg/m ² 90 mg/m ²	D0 D1-D2	Benda premedications (optional): vena, paramol If ANC < 1000 or Plt < 75000 on D7, reduce Benda from 90-> 70 mg/m ² or 70-> 50 mg/m ²
DRC ORR(83%), Major response(74%)	Dexamethasone Rituximab Cyclophosphamide	40 mg IF 375 mg/m ² /cycle IF 100 mg/m ² PO BID	D1 D1 D1-D5	Cycle length: 21 days (沒有RB的選擇) J Clin Oncol 25(22):3344-3349
Diffuse Large B-cell Lymphoma (DLBCL)				
CHOP (or R-CHOP)	Rituximab Cyclophosphamide Doxorubicin Vincristine Prednisolone	375 mg/m ² 750 mg/m ² 50 mg/m ² 2 mg 60 mg/m ² /day	D0 (共 8 cycles) D1 D1 D1 D1-D5	
R-Gemox	Rituximab Gemcitabine Oxaliplatin	375 mg/m ² 1000 mg/m ² 100 mg/m ²	D0, D14 D1, D15 D1, D15	
NK/T Cell Lymphoma (治愈性RT通常都50-60Gy)				

2/3 DeVIC (搭配CCRT)	Dexamethasone Etoposide Ifosfamide Carboplatin <i>RT</i>	40 mg 67 mg/m ² 1000 mg/m ² 200 mg/m ² <i>50-50.4 Gy</i>	D1-D3 D1-D3 D1-D3 D1 <i>5-6 weeks</i>	G-CSF if WBC < 2000 J Clin Oncol. 2009 Nov 20;27(33):5594-600 Cycle length: 21 d Total 3 cycles 劑量調整: FN: 2/3 of all chemo ≥ 3級血小板低下: 2/3 carboplatin ≥ 2級血尿: 2/3 Ifosfamide WBC < 2k or Plt < 100k: delay至多3w
LOD	L-asparaginase Vincristine Predonine	6000 IU/m ² (50 IU skin test) 1.4 mg/m ² 100 mg	D1-D5 D1 D1-D5	Cycle length: 21 days LOD(2)→IFRT(56Gy) →LOD(2-4)
SMILE	Dexamethasone Methotrexate Ifosfamide L-asparaginase (pegaspargase) Etoposide	40 mg 2000-3000, ex: 1500mg/m ² 1500 mg/m ² 6000 IU/m ² (2000-2500 IU/m ²) 100 mg/m ²	D2-D4 D1 D2-D4 From D8(QOD x7 doses) D2-D4	G-CSF since D6
GELOX	Gemcitabine Oxaliplatin L-asparaginase	1000(標準)/800 mg/m ² 130(標準)/85 mg/m ² 6000 U/m ²	D1,D8 D1 D1-D7	Cycle length: 21 days 自費:約13000 NTD/cycle
P-GEMOX	Gemcitabine Oxaliplatin Pegaspargase	1000 mg/m ² 130 mg/m ² 2500 IU/m ²	D1, D8 D1 D1 (IM)	Cycle length: 21 days
P-GEMOX	Gemcitabine Oxaliplatin Pegaspargase	1250 mg/m ² 85 mg/m ² 2500 IU/m ²	D1 D1 D1 (IM)	Cycle length: 14 days
GELOX/P-GEMOX在新診斷ENKTL, stage IE, IIE。搭配RT成sandwich induction處方 GELOX(2)→IFRT(56 Gy/28 fr)→GELOX(2-4)				
DICE-L	Dexamethasone Ifosfamide Cisplatin Etoposide	20 mg/m ² 1.2 g/m ² 25 mg/m ² 60 mg/m ²	D1-D4 D1-D3 D1-D4 D1-D4	Cycle length: 21 days DICE(4)→RT(45Gy) 5-year PFS(82.9%) <i>(會Nadir)</i>

	L-asparaginase	6000 IU/m ²	D6-D11	Leuk Lymphoma. 2016 Jul;57(7):1600-6
DDPG	Dexamethasone Cisplatin Gemcitabine L-asparaginase	15 mg/m ² 20 mg/m ² 800 mg/m ² 6000 IU/m ² (4 IU skin test)	D1-D5 D1-D4 D1,D8 D1-D7 (SC)	Cycle length: 21 days 過敏可換Pegaspargase 2-year PFS 61.8% Oncotarget. 2016 Aug 23; 7(34): 55721–55731
Pembrolizumab	Pembrolizumab	2 mg/kg	D1	Q3W 5/7 CR after 7 cycles Blood 2017 129:2437-2442
Nivolumab	Nivolumab	40 mg or 3 mg/kg (仿照HL)	D1	Q2W Ann Hematol. 2018 Jan;97(1):193-196
T-cell lymphoma				
Pralatrexate	Folic acid Vitamin B12 Pralatrexate	1-1.25 mg/day PO 1g IM 30 mg/m ² weekly	Since D-11 Every 8-10 wk QW on W1-W6	Cycle length: 7 weeks (做6休1) 若mucositis嚴重, 可補充Leucovorin
Acute Myeloid Leukemia (AML)				
I3A7 (Induction)	Idarubicin Ara-C	12 mg/m ² 100 mg/m ²	D1-D3 D1-D7	
I2A5 (Consolidation)	Idarubicin Ara-C	12 mg/m ² 100 mg/m ²	D1-D2 D1-D5	
Gemtuzumab ozogamacin (Mylotarg)	Gemtuzumab ozogamacin (relapse, monotherapy)	3 mg/m ² (maximum 4.5 mg/dose)	D1,4,7	Premedication: - Paramol x 1 - Vena x 1 - Solu-medrol (1mg/kg)
Ven+Cladribine +LDAC (induction)	Venetoclax Cladribine Cytarabine	400 mg 5 mg/m ² IF 2 hrs 20 mg SC BID	D1-21 D1-5 D1-10	J Clin Oncol . 2022 Jun 15;JCO2102823

Ven+Cladribine +LDAC (consolidation_A)	Venetoclax Cladribine Cytarabine	400 mg 5 mg/m ² IF 2 hrs 20 mg SC BID	D1-21 D1-D3 D1-D10	
Ven+Vidaza (consolidation_B)	Venetoclax Vidaza	400 mg 75 mg/m ²	D1-21 D1-7	
CLIA+ Venetoclax (induction)	Cladribine Cytarabine Idarubicin Venetoclax	5 mg/m ² IF 2 hrs 1.5 g/m ² IF 2 hrs _(1.5 g/m² in age ≥ 60) 10 mg/m ² 400 mg	D1-5 D1-5 D1-3 D2-8	先Cladribine再滴 Cytarabine WBC ≥ 20000/uL要 先cytoreduction。 Nadir時搭配 anti-bacteria/fungu s/virus prophylaxis. Cycle length: 28 days https://doi.org/10.1016/S2352-3026(21)00192-7
CLIA+ Venetoclax (Consolidation)	Cladribine Cytarabine Idarubicin Venetoclax	5 mg/m ² IF 2 hrs 1.0 g/m ² IF 2 hrs _(0.75 g/m² in age ≥ 60) 8 mg/m ² 400 mg	D1-3 D1-3 D1-2 D2-8	
Re-induction for relapse: HiDAC-containing regimen, FLAG, NEC, CLAG				
FLAG (or I3FLAG) (or M2FLAG)	F ludarabine A ra-C G -CSF (Idarubicin) (Mitoxantrone)	30 mg/m ² 2000 mg/m ² 300 µg 10 mg/m ² 10 mg/m ²	D1-D5 D1-D5 D0-D6 D1-D3 D1-D2	Solu-Medrol 40mg QD(before Ara-C)
HDAC (or I3HDAC) (or N3HDAC)	Ara-C (Idarubicin) (Mitoxantrone)	2000 mg/m ² (q12h , 共8 dose) 12 mg/m ² 12 mg/m ²	D1-D5 D1-D3 D1-D3	
N3A7	Mitoxantrone Ara-C	12 mg/m ² 100 mg/m ²	D1-D3 D1-D7	
NEC (or MEC)	M itoxa N trone Etoposide Ara-C	8 mg/m ² 100 mg/m ² 400 mg/m ² (q12h , 共10 dose)	D1-D3 D1, D3, D5 D1-D5	
CLAG	C lofarabine Ara-C	30 mg/m ² 500 mg/m ²	D1-D5 D1-D5	Ara-C要在 Clofarabine滴完後 3.5 hr再給

LDAC	Ara-C	20 mg/m ²	D1-D10	
Frail AML patients				
Venetoclax + LDAC	Venetoclax Ara-C Venetoclax	100mg-200mg-400mg 20 mg/m ² 600 mg/d	D1-D3 D1-D10 D1-D28 (titrate from 50-100mg every 4-5 days)	Blood 2017 130:890 1-y CR/CRi: 62% JCO. 2019 May 20;37(15):1277-1284 Venetoclax dose reduction to 50%(if moderate CYP3A inhibitor) or 25%(if strong CYP3A inhibitor)
Venetoclax + Azacitidine	Venetoclax Azacitidine	100mg-200mg-400mg- 75 mg/m ²	D1-D28 D1-D7	Blood 2018 08:868752 8.9 m CR/CRi: 67% Cycle length: 28 day
Azacitidine + pembrolizumab	Azacitidine Pembrolizumab	125 mg/m ² 2 mg/kg	D1-D5 D1	
Acute Promyelocytic Leukemia (APL)				
APML4 Induction	All-trans retinoic acid Idarubicin ATO Prednisone	45 mg/m ² /day 6-12 mg/m ² 0.15 mg/kg/day IF 1 mg/kg/day PO	D1-D36 D2,4,6,8 D9-D36 D1-D10	Age 1-60 (Ida 12) Age 61-70 (Ida 9) Age >70 (Ida 6) Prednisone until WBC < 1000/uL
	Component therapy: Plt > 30k, normal PT/aPT, fibrinogen > 150 mg/dL If grade III-IV non-hematologic AE(ex: QTc prolong): may reduce to ATRA(25 mg/m ² /d), ATO(0.08 mg/kg/day) <i>Blood. 2012 Aug 23;120(8):1570-80</i>			
APML4 Consolidation 1	All-trans retinoic acid ATO	45 mg/m ² /day 0.15 mg/kg/day IF	D1-D28 D1-D28	
APML4 Consolidation 2 (OPD)	All-trans retinoic acid ATO	45 mg/m ² /day 0.15 mg/kg/day IF	D1-7, 15-21, 29-35 D1-5, 8-12, 15-19, 22-26, 29-33	Cycle length: 5 weeks

APML4 Maintenance (OPD)	All-trans retinoic acid MTX 6-MP	45 mg/m ² /day 5-15 mg/m ² /week PO 50-90 mg/m ² /day PO	D1-D14 D15-90 D15-90	Total 8 cycles (2 years) Cycle length: 90 days Target WBC 1-2k/uL
Chronic myelogenous Leukemia (CML)				
	Imatinib	400 mg PO QD		
Acute Lymphoblastic Leukemia (ALL)				
GRAALL 2003 <u>Corticosteroid prephase</u>	Prednisone(oral) Methotrexate(IT)	60 mg/m ² /day 15 mg	D-7 - D-1 D-7 - D-4(挑1天打1次)	台大通常不在這時候做IT, 因PB blastosis February 2009 Journal of Clinical Oncology 27(6):911-8
GRAALL 2003 <u>Induction part 1</u>	Prednisone(oral) Daunorubicin(IF, 台大用 doxorubicin) Vincristine (IV) Asparaginase(IM) Cyclophosphamide(IF) Rituximab	60 mg/m ² /day 50 mg/m ² /day 2 mg 6000 units/m ² /day 750 mg/m ² /day 375 mg/m²/day	D1-D14 D1-D3 D1, D8 D8, D10, D12 D1 D1, D7	Daunorubicin: doxorubicin= 1: 0.6 -1 Asparaginase也可以IV(過敏機會高) or SC Rituximab : 用於 65 歲以下 CD20+ cell > 20% ALL。若不做移植, 共需375 mg/m ² 16個dose
GRAALL 2003 <u>Induction part 2</u>	Daunorubicin(IV) Vincristine (IV) Asparaginase(IM) Cyclophosphamide(IV) G-CSF(SC)	30 mg/m ² /day 2 mg 6000 units/m ² /day 750 mg/m ² /day (Good responder) 500 mg/m ² Q12H (Poor responder) 150 mcg/m ² /day	D1-D2 D1, D8 D6, D8, D10, D12, D14 D1 D1-D2 D3 -	Steroid prephase做完PB blast ≥ 1000/ul or/and induction part 1 D7 BM blast ≥ 5%視為poor responder Asparaginase需先打4 unit做skin test
GRAALL 2003 <u>Salvage course (I3HDAC)</u>	Idarubicin(IF) Cytarabine(IF) Rituximab	12 mg/m ² /day 2000 mg/m ² Q12H 375 mg/m²/day	D1-D3 D1-D4 D1, D7	Induction part 2 結束後沒有CHR的則進入 salvage course
GRAALL 2003 <u>Block Ara-C(1)</u>	Cytarabine(IV) Dexamethasone(PO) Asparaginase(IM) G-CSF(SC) Rituximab	2000 mg/m ² Q12H 10 mg Q12H 10000 units/m ² /day 150 mcg/m ² /day 375 mg/m²/day	D1-D2 D1-D2 D3 D7-D13 D1	台大用 methylprednisolone 40 mg 代替 Dexa 10mg before Cytarabine
GRAALL 2003 <u>Block MTX(2)</u>	Methotrexate(cIF) Leucovorin(IV) Vincristine(IV) Asparaginase(IM)	3000 mg/m ² cIF 24 hours 15 mg Q6H 2 mg 10000 units/m ² /day	D1 D3 5AM-D4 11PM D1 D2	台大 Mercaptopurine用吃的(同劑量)

	Mercaptopurine(IV) G-CSF(SC)	60 mg/m ² /day 150 mcg/m ² /day	D1-D7 D8-D13	Leucovorin用100 mg Q6H
GRAALL 2003 <i>Block</i> <i>Endoxan(3)</i>	Cyclophosphamide(IF) Etoposide(IF) Methotrexate(IF) G-CSF(SC) Rituximab	500 mg/m ² /day 75 mg/m ² /day 25 mg/m ² 150 mcg/m ² /day 375 mg/m²/day	D1-D2 D1-D2 D1 D3 - D1	
GRAALL 2003 <i>Late intensification</i> <i>(induction CR)</i>	Prednisone(oral) Daunorubicin(IF) Vincristine (IV) Asparaginase(IM) Cyclophosphamide(IF) G-CSF(SC) Rituximab	60 mg/m ² /day 30 mg/m ² /day 2 mg 6000 units/m ² /day 500 mg/m ² Q12H 150 mcg/m ² /day 375 mg/m²/day	D1-D14 D1-D3 D1, D8, D15 D8, D10, D12, D18, D20, D22 D15 If ANC < 500 D1, D7	Between block 6 and 7
GRAALL 2003 <i>Late intensification</i> <i>(salvage CR)</i>	Idarubicin(IF) Cytarabine(IF) G-CSF(SC)	9 mg/m ² /day 2000 mg/m ² Q12H 150 mcg/m ² /day	D1-D3 D1-D4 D9 -	
GRAALL 2003 <i>Maintenance part</i> <u>1</u>	Prednisone(oral) Vincristine (IV) Methotrexate(PO) Mercaptopurine(PO) Rituximab	40 mg/m ² /day 2 mg 25 mg/m ² /week 60 mg/m ² /day 375 mg/m²/day	D1-D7 D1 D1,D8,D15,D22 D1-D28 奇數月D1	Cycle length: 28 days Block結束後再維持1年 MTX一星期要吃15顆， 怎麼吃好
GRAALL 2003 <i>Maintenance part</i> <u>2</u>	Methotrexate(PO) Mercaptopurine(PO)	25 mg/m ² 60 mg/m ² /day	D1,D8,D15,D22 D1-D28	Cycle length: 28 days Maintenance part 1結束 後再維持1年
GRAALL 2003 <i>No CNS</i> <i>involvement</i>	TIT Cranial irradiation(18cGy)	Induction part 1 Bloc Endoxan Late intensification Before maintenance	D1, D8 D1 D1	TIT 共6次 要和 Mercaptopurine同 時服用
GRAALL 2003 <i>CNS involvement</i>	TIT Cranial irradiation(15cGy) Cranial irradiation(24cGy)	Induction part 1+2 Bloc 1 Bloc 2 Bloc 3, 6 Before HSCT Before maintenance (if no HSCT)	BIW (共8次) 2次 2次 各1次	TIT 共14次 要和 Mercaptopurine同 時服用

Hyper CVAD (Cycle 1,3,5,7) Course A	Cyclophosphamide Vincristine Doxorubicin Dexamethasone	300 mg/m ² (q12h x 6 dose) 2 mg 50 mg/m ² 40 mg/day	D1-D3 D4, D11 D4 D1-D4	(Age > 40; Ph+, 合併 TKI)
Hyper CVAD (Cycle 2,4,6,8) Course B	Methotrexate Cytarabine Leucovorin Methylprednisolone	1000 mg/m ² IVF 24 hours 3000 mg/m ² (BID x 4 dose) 100 mg (q6h) 40 mg BID (before Ara-C)	D1 D2-D3 D3- D2-D3	Until MTX < 0.1µmol/L
Hyper CVAD (maintenance)	6-mercaptopurine Methotrexate Vincristine Prednisone	50 mg PO 20 mg/m ² PO 2 mg IV 200 mg PO	TID QW QM QD	用 5M
CALGB 8811 (Induction)	Cyclophosphamide Doxorubicin Vincristine L-asparaginase Prednisolone G-CSF	1200 mg/m ² 30 mg/m ² 2 mg 6000 IU/m ² 60 mg/m ² /day 5 µg/kg/day	D1 D1-D3 D1, D8, D15, D22 D5, D8, D11, D15, D18, D22 D1-D22 From D5	(Age > 40; Ph-)
HOP (or CHOP)	(Cyclophosphamide) Doxorubicin Vincristine Prednisolone	1200 mg/m ² 30 mg/m ² 2 mg 40 mg/m ² , BID	D1 D1-D3 D1, D8, D15 D1-D21	
HD MTX-Ara-C	Methotrexate Ara-C	200 mg/m ² , then 800 mg/m ² 3000 mg/m ² (q12h, 共4 dose)	D1 D2-D4	
N3HDAC	Mitoxantrone Ara-C	12 mg/m ² /day 2000 mg/m ² (q12h, 共8 dose)	D1-D3 D1-D5	

Inotuzumab	Inotuzumab	0.8 mg/m ² day 0.5 mg/m ² day 0.5 mg/m ² day	D1 D8 D15	Pre-medication - Rinderon 1 amp - Acetaminophen x 1 - Vena 1 amp
Chronic Lymphocytic Leukemia (CLL)				
F3C3	Fludarabine Cyclophosphamide	30 mg/m ² 250 mg/m ²	D1-D3 D1-D3	
F3C3M1	Fludarabine Cyclophosphamide Mitoxantrone	30 mg/m ² 250 mg/m ² 6 mg/m ²	D1-D3 D1-D3 D1	
R-F	Fludarabine Rituximab	25 mg/m ² 375 mg/m ²	D1-D5 D1, D4 (C1); D1(C2-6)	
R-FC	Fludarabine Cyclophosphamide Rituximab	25 mg/m ² 200 mg/m ² 375 mg/m ²	D2-D4 D2-D4 D1	
Plasma cell myeloma				
TD (cycle length: 28 days)	Thalidomide Dexamethasone	200 mg/day 40 mg/day	D1-D21 D1,8,15,22	Thalidomide in C1: 100mg(D1-D14), 200mg(D15-21) Dexa 20mg if Age > 75

VTD (cycle length: 28 days)	Bortezomib Thalidomide Dexamethasone	1.3 mg/m ² SC 200 mg/day 40 mg/day	D1,4,8,11 D1-D21 D1,8,15,22	Thalidomide in C1: 100mg(D1-D14), 200mg(D15-21) Dexa 20mg if Age > 75
VRD classic	Bortezomib Lenalidomide Dexamethasone	1.3 mg/m ² SC 25 mg/day 20 mg/day	D1,4,8,11 D1-D14 D1,2,4,5,8,9,11 ,12	Cycle length: 21D Br J Haematol . 2022 Oct;199(2):190-204
VRD lite	Bortezomib Lenalidomide Dexamethasone	1.3 mg/m ² SC 15 mg/day 20 mg/day	D1,8,15,22 D1-D21 D1,2,8,9,15,16, 22,23	Cycle length: 35D Br J Haematol . 2022 Oct;199(2):190-204
VRD premium lite	Bortezomib Lenalidomide Dexamethasone	1.3 mg/m ² SC 15-25 mg/day 20 mg/day	D1,8,15,22 D1-D21 D1,2,8,9,15,16, 22,23	Cycle length: 28D Br J Haematol . 2022 Oct;199(2):190-204
VRD ultra lite	Bortezomib Lenalidomide Dexamethasone	1.3 mg/m ² SC 15 mg/day 20 mg/day	D1,8,15 D1-D21 D1,2,8,9,15,16	Cycle length: 28-35D Br J Haematol . 2022 Oct;199(2):190-204
VCD (cycle length: 28 days)	Bortezomib Cyclophosphamide Dexamethasone	1.3 mg/m ² SC or IV 300 mg/m ² 40 mg/day	D1,4,8,11 D1,8,15,22 D1,8,15,22	Velcade: SC較不 會neuropathy Velcade 可改1.7 mg/m ² SC D1,8,15 Cyclo可改100mg QD x 4 days Dexa 20mg if Age > 75
VAD	Vincristine Doxorubicin Dexamethasone	0.4 mg 9 mg/m ² 40 mg/day	D1-D4 D1-D4 D1-D4	Dexa 20mg if Age > 75
DECP	Dexamethasone Etoposide Cyclophosphamide Cisplatin	40 mg/day 40 mg/m ² /day 400 mg/m ² /day 10 mg/m ² /day	D1-D4 D1-D4 D1-D4 D1-D4	

VTD-PACE *CVC	Bortezomib Thalidomide Dexamethasone Cisplatin Doxorubicin Cyclophosphamide Etoposide	1.3 mg/m ² SC(~1.75mg) 50-100 mg/day 40 mg/day 10 mg/m ² (HD患者, 50% dose post-HD) 10 mg/m ² 400 mg/m ² (HD患者, 50% dose post-HD) 40 mg/m ² (HD患者, 50% dose post-HD)	D1,4,8,11 D1-D28 D1-D4 D1-D4 D1-D4 D1-D4 D1-D4	D1,4和D8,D11共用1支 Continuously 24hrs 24hrs
HD-Melphalan ASCT	Melphalan	100 mg/m ²	D-3, D-2	
MP (Cycle length: 28 days)	Melphalan Prednisone	6-9 mg/m ² /day 60 mg/m ² /day	D1-D7 D1-D4	D7-D14要抽血調藥 至WBC約3000 Cycle length: 28 days
MPT	Melphalan Prednisone Thalidomide	0.25 mg/kg 2 mg/kg 200 mg	D1-D4 D1-D4 D1-D42	Cycle length: 42 days. Up to 12 cycles. N Engl J Med 2014;371:906-17.
KRd	Carfilzomib Lenalidomide Dexamethasone	20 mg/m ² (C1D1-2), then 27mg/m ² 25mg 40mg	D1,2,8,9,15,16 D1-21 D1,8,15,22	Cycle length: 28 days
Gem/Bu/Mel ASCT for MM	Gemcitabine Busulfan Melphalan	75(loading)+1800 mg/m ² QD 100 mg/m ² QD 60 mg/m ² QD	D-8, D-3 D-8 - D-5 D-3, D-2	Gem: 10 mg/m ² /min Blood 2013

2017 ESMO
MM guidelines

Table 6. Major treatment regimens in multiple myeloma

Regimen	Usual dosing schedule
Front-line:	
Bortezomib/melphalan/prednisone (VMP) [11]	Bortezomib 1.3 mg/m ² subcutaneously days 1, 8, 15, 22; melphalan 9 mg/m ² orally days 1–4; prednisone 60 mg/m ² orally days 1–4; repeated every 35 days
Lenalidomide/low-dose dexamethasone (Rd) [12]	Lenalidomide 25 mg orally days 1–21; dexamethasone 40 mg orally days 1, 8, 15, 22; repeated every 28 days
Melphalan/prednisone/thalidomide (MPT) [13]	Melphalan 0.25 mg/kg orally days 1–4 (use 0.20 mg/kg/day orally days 1–4 in patients over the age of 75); prednisone 2 mg/kg orally days 1–4; thalidomide 100–200 mg orally days 1–28 (use 100 mg dose in patients >75); repeated every 6 weeks
Bortezomib/cyclophosphamide/dexamethasone (VCD) [14]	Cyclophosphamide 300 mg/m ² orally days 1, 8, 15 and 22; bortezomib 1.3 mg/m ² i.v. on days 1, 8, 15, 22; dexamethasone 40 mg orally on days 1, 8, 15, 22; repeated every 4 weeks
Bortezomib/thalidomide/dexamethasone (VTD) [14]	Bortezomib 1.3 mg/m ² subcutaneously days 1, 8, 15, 22; thalidomide 100–200 mg orally days 1–21; dexamethasone 20 mg on day of and day after bortezomib (or 40 mg days 1, 8, 15, 22); repeated every 4 weeks × 4 cycles as pre-transplant induction therapy
Bortezomib/lenalidomide/dexamethasone (VRd) [14]	Bortezomib 1.3 mg/m ² subcutaneously days 1, 8, 15; lenalidomide 25 mg orally days 1–14; dexamethasone 20 mg on day of and day after bortezomib (or 40 mg days 1, 8, 15, 22); repeated every 3 weeks
Relapse/refractory disease:	
Carfilzomib/lenalidomide/dexamethasone (KRd) [24, 32]	Carfilzomib 20 mg/m ² (cycle 1) and 27 mg/m ² (subsequent cycles) i.v. on days 1, 2, 8, 9, 15, 16; lenalidomide 25 mg orally days 1–21; dexamethasone 40 mg on days 1, 8, 15, 22; 28-day cycles
Bortezomib/dexamethasone/panobinostat (VD-Pano) [31]	Bortezomib 1.3 mg/m ² subcutaneously days 1, 8, 15, 22; dexamethasone 20 mg on day of and day after bortezomib; panobinostat 20 mg orally days 1, 3, 5 week 1 and 2; repeated every 3 weeks (cycles 1–8)
Carfilzomib/dexamethasone (Kd) [33]	Carfilzomib 56 mg/m ² i.v. days 1, 2, 8, 9, 15, 16 (20 mg/m ² days 1, 2, cycle 1 only); dexamethasone 20 mg days 1, 2, 8, 9, 15, 16, 22, 23; 28-day cycles
Lenalidomide/dexamethasone/elotuzumab (Rd-Elo) [34]	Lenalidomide 25 mg orally days 1–21; dexamethasone 40 mg weekly; elotuzumab 10 mg/kg i.v. weekly cycle 1 and 2, every other week cycles 3+; repeated every 28 days
Lenalidomide/dexamethasone/ixazomib (IRd) [35]	Lenalidomide 25 mg orally days 1–21; dexamethasone orally 40 mg days 1, 8, 15, 22; ixazomib 4 mg orally days 1, 8, 15; repeated every 28 days
Bortezomib/dexamethasone/daratumumab (DVd) [38]	Bortezomib 1.3 mg/m ² subcutaneously days 1, 4, 8, 11 (cycles 1–8); dexamethasone 20 mg orally days 1, 2, 4, 5, 8, 9, 11, 12 (cycles 1–8); daratumumab 16 mg/kg i.v. every week (cycles 1–3), every 3 weeks (cycles 4–8), every 4 weeks (cycles 9+); cycles 1–8: repeated every 21 days; cycles 9+: repeated every 28 days
Lenalidomide/dexamethasone/daratumumab (DRd) [39]	Lenalidomide 25 mg orally days 1–21; dexamethasone 40 mg orally weekly; daratumumab 16 mg/kg i.v. weekly (cycles 1–2), every other week (cycles 3–6), every 4 weeks (cycles 7+)

Maintenance (velcade based)	Bortezomib Thalidomide	1.3 mg/m ² 100 mg	D1,4,8,11 QD	Cycle length: 3 months
	Bortezomib Thalidomide	1.3 mg/m ² 50 mg	Q2W QD	Up to 2 years
Maintenance (lenalidomide based)	Lenalidomide	10 mg	D1-D21 (也有人 QD吃到PD)	Cycle length: 21 days Median PFS 26.7 months (+6.7 months)

Maintenance (Following ASCT)	Ixazomib	3 mg (C1-C4) or 4 mg (C5-, if tolerate 3 mg)	D1,8,15	Cycle length: 28 days Tourmaline-MM3
Aplastic anemia				
CsA + rATG (台大用法, 與 NEJM 2011不同)	Rabbit ATG Methylprednisolone Cyclosporine Methylprednisolone G-CSF	2.5 mg/kg QD 5.0 mg/kg QD 2.5 mg/kg BID 2.5 mg/kg QD 5.0 mcg/kg QN	D1-D5 D1-D5 D6-D90 D6-D10 D6-	Steroid D11後開始 taper, D30 DC
CsA + rATG (N Engl J Med 2011;365:430-8)	Rabbit ATG Cyclosporine	3.5 mg/kg QD 5 mg/kg Q12H	D1-D5 D1-D180	CsA需測濃度維持在200-400 ng/mL, 在6M停藥。 aerosolized pentamidine for PJP prophylaxis; valtrex for HSV prevention
Bone Marrow Transplant (BMT)				
BEAM ASCT for lymphoma	BCNU Etoposide Ara-C Melphalan	300 mg/m ² QD 200 mg/m ² QD 200 mg/m ² BID 140 mg/m ² QD	D-6 D-5-D-2 D-5-D-2 D-1	
Gem/Bu/Mel ASCT for HL	Gemcitabine Busulfan Melphalan <i>Phenytoin</i> <i>Dexamethasone</i>	75 _(loading) +1800 mg/m ² QD 100 mg/m ² QD 60 mg/m ² QD 300-600 mg/day 8 mg BID	D-8, D-3 D-8 - D-5 D-3, D-2 D-9 - D-4 D-9 - D-2	Gem: 10 mg/m ² /min Avoid: acetaminophen, metronidazole(會增加 busulfan濃度), azoles(增加 phenytoin濃度, 減少 voriconazole濃度), from D-10 - D-1
Prevention of post-transplant relapse				
Post-transplant azacitidine (RICAZA trial)	Azacitidine	36 mg/m ² QD SC (24 mg/m ² if grade III-IV hematological toxicity)	D1-D5	Cycle length: 28 days Total 12 cycles Start since ANC > 1000, Plt > 50k, (median day 54) Relapse hazard ratio: 0.3

Peripheral blood stem cell mobilization (PBSC-mobilization)				
Modified IVE (劑量 $\frac{2}{3}$)	Ifosfamide Etoposide (VP-16) Epirubicin Mesna Mesna Mesna Keppra G-CSF	3 g/m ² QD cIF 100-200 mg/m ² IF 2 hours 50 mg/m ² IF 30 mins 1.8 g/m ² IF 15 mins 3.0 g/m ² cIF 5.4 g/m ² IF 12 hours 500 mg BID 5 ug/kg	D1-D2 D1-D3 D1 D1 (before Ifos) D1-D2 D3 (after Ifos) D0 - D8 D5-	200 mg/m ² if no CR CD34 monitoring since D14-20 (after WBC > 5 k/uL) J Clin Exp Hematop. 2016;56(1):50-4
BED	Bendamustine Etoposide Betamethasone G-CSF	120 mg/m ² 200 mg/m ² 32 mg 10 mcg/kg/d sc	D1, D2 D1-D3 D1-D4 D5-	Blood Res 2018;53:223-226
Myelodysplastic syndrome (MDS)				
	Azacitidine	75 mg/m ² SC	D1-D7	Q4WK
	Decitabine	15 mg/m ² (q8h, 共 9 dose)	D1-D3	Q6WK