

Catégorie de risque	Protocole
> 20%	Topotecan IV
	Carboplatine-Docetaxel
	Cisplatine – Etoposide
10-20%	Carboplatine-Etoposide
	CAV
	Cisplatine-Paclitaxel
	Cisplatine-docetaxel
	Cisplatine – Vinorelbine
< 10%	Docetaxel
	Carboplatine-paclitaxel (Bevacizumab)
	Cisplatine-gemcitabine

Tableau 11 – Risque de neutropénie fébrile en fonction du protocole de chimiothérapie utilisé en oncologie thoracique (28,39,40).

3. Prophylaxie secondaire (après un épisode de neutropénie à la cure précédente) par FCH

La prophylaxie secondaire (après une première neutropénie fébrile) est possible, mais n’a jamais démontré son intérêt par rapport à une diminution des doses de CT dans le domaine de la cancérologie pulmonaire. Dans les situations palliatives, cette dernière solution doit donc être préférée.

Les recommandations ASCO et MASCC/ESMO recommandent une prophylaxie secondaire par FCH dans les cas où une réduction de dose de chimiothérapie pourrait compromettre la survie, tout en rappelant que dans de nombreuses situations, la réduction de dose ou l’espacement des cures sont des alternatives raisonnables.

Dans ses recommandations, l’ESMO retient les arguments suivants comme étant des situations dans lesquelles il est possible de proposer une prophylaxie secondaire :

- Le risque d’infection à la prochaine cure peut engager le pronostic vital,
- Le niveau de réduction de dose pour éviter une récurrence de neutropénie fébrile est trop important,
- Le risque de différer la prochaine cure est trop important,
- Le manque d’adhésion au protocole de traitement risque de compromettre les chances de guérison ou la survie.

En cas de neutropénie fébrile ou de limitation de dose lié au taux de polynucléaires neutrophiles malgré l’utilisation de FCH au cycle précédent, il faut alors considérer une réduction de dose ou un changement de protocole.

Recommandation

Dans les situations palliatives, le recours aux FCH en prophylaxie secondaire ne doit pas être systématique et il est préférable de considérer une diminution des doses de chimiothérapie.

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