

Poster 58: Impact of a taxane titration protocol on incidence of hypersensitivity reactions in patients being treated for a gynecologic malignancy

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Topic

Quality & Healthcare Systems

Objectives

Taxanes are a mainstay of chemotherapy for gynecologic malignancies. Anecdotally, the rate of taxane hypersensitivity reactions (HSRs) has risen at our institution over the past several years. Titration, or slowing the rate, of taxanes is the primary treatment for taxane reactions. Our institution implemented a universal titration protocol for all patients receiving a taxane in an attempt to decrease the number of reactions. The primary aim of this study is to determine if implementation of the titration protocol at time of taxane administration reduced the rate of HSRs.

Methods

A retrospective review was performed of gynecologic oncology patients who received taxane before or after implementation of a titration protocol in February 2024. A 12-month period was utilized for each cohort of patients. Patients were excluded if they received treatment both prior to and following implementation of the titration protocol, or if they received a taxane in a prior line of treatment. A Fisher's exact test was used to compare HSR rates, grades of reaction, rates of EMSA transfers, and admission rates in each group.

Results

In total, 314 patients met inclusion criteria (193 in the pre-titration group, 121 in the post group). Over one-third (37%) had ovarian cancer, 17% cervical or vaginal, 43% endometrial, and 2.9% vulvar. Most (84%) were undergoing treatment for primary disease and 16% for recurrent disease. HSR rates in the pre and post groups were 39% and 31% respectively ($p=0.12$). The distribution of grade of HSRs was similar between the pre and post groups ($p=0.8$). Rates of EMSA transfers were 4.4% and 3.3% in the pre and post groups respectively ($p=0.8$); admission rates were 2.0% and 2.5% respectively.

Conclusions

We found that the difference in rates of HSRs pre- and post-titration protocol was not statistically significant. In addition, the distribution of grades of HSRs, rates of EMSA transfers, and rates of hospital admissions were similar in both groups. Further research on alternate interventions is needed to reduce HSRs against taxanes as a mainstay of treatment for gynecologic malignancies.

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Abstract Table or Graph

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	Overall N = 314 ¹	Pre N = 193 ¹	Post N = 121 ¹	
Outcome				p-value²
HSR	113 (36%)	76 (39%)	37 (31%)	0.12
Grade of HSR				0.8
1	6 (5.4%)	5 (6.6%)	1 (2.8%)	
2	95 (85%)	64 (84%)	31 (86%)	
3	9 (8.0%)	6 (7.9%)	3 (8.3%)	
4	2 (1.8%)	1 (1.3%)	1 (2.8%)	
Unknown	0 (0%)	0 (0%)	1 (0.8%)	
EMSA Transfer	11 (3.9%)	7 (4.4%)	4 (3.3%)	0.8
Inpatient Admission	5 (2.3%)	2 (2.0%)	3 (2.5%)	>0.9

HSR: hypersensitivity reaction; EMSA: emergency medical services authority.

¹ n (%)

² Fisher's exact test