

ERRATUM

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Use of etoposide in patients with organ dysfunction: pharmacokinetic and pharmacodynamic considerations

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On page S 80 of the above supplement article Table 3 should have been presented as follows:

Table 3 Examples of clinical conditions where etoposide elimination, metabolism, and (or) protein binding are affected: etoposide pharmacologic effect^a

| Excretion (renal) | Metabolism (hepatic) | Fraction of etoposide not bound to protein (f_u) | Anticipated pharmacologic effect |
|-------------------|----------------------|--|----------------------------------|
| Normal | Normal | Increased (e. g., hypoalbuminemia) | Unchanged |
| Decreased | Normal | Normal | Increased |
| Normal | Decreased | Normal | Increased |
| Decreased | Normal | Increased (e. g., hypoalbuminemia) | Increased (\pm) |
| Normal | Decreased | Increased (e. g., hypoalbuminemia) | Increased (\pm) |
| Decreased | Decreased | Increased (e. g., hypoalbuminemia) | Increased (\pm) |

^a Elimination and metabolism are assumed to remove etoposide from the body, and no active metabolites are formed via metabolism. Pharmacologic effect is against both normal tissue (toxicity) and tumor tissue (efficacy)