BC Cancer Protocol Summary for Topical Carmustine in Cutaneous T-cell Lymphoma

Protocol Code LYCARTOP

Tumour Group Lymphoma

Contact Physician Dr. Vincent Ho

ELIGIBILITY:

- Histology: cutaneous T-cell lymphoma (mycosis fungoides)
- Used as an alternate to topical mechlorethamine (nitrogen mustard, LYMECHLOR).
 Note: carmustine does not cross react with other aklylating agents and can be used in patients allergic to mechlorethamine.

TESTS:

- Baseline (required before first treatment): CBC and diff, platelets
- For application to greater than 10% BSA: monthly CBC and diff, platelets x 1 year or as specified by Skin Lymphoma Team member
- For application to less than 10% BSA: q 3 monthly CBC and diff, platelets x 1 year or as specified by Skin Lymphoma Team member

TREATMENT:

Drug	Dose	BC Cancer Administration Guideline
carmustine	0.4% in white petrolatum	Apply daily to lesions as directed by Skin Lymphoma Team member

Treatment will continue daily until 1 year after remission or as specified by Skin Lymphoma Team member

DOSE MODIFICATIONS:

1. Hematological:

ANC (x 10 ⁹ /L)		Platelets (x 10 ⁹ /L)	Dose Modification
less than 1.2	or	less than 75	variable

Contact your Skin Lymphoma Team member

PRECAUTIONS:

- 1. **Cutaneous Reactions**: Erythematous reactions may occur as early as 4 weeks after initiating treatment. Erythema, skin tenderness and telangiectasia may occur. If this occurs, stop applying the ointment to the affected areas until this resolves.
- 2. **Drug Interactions**: Because carmustine can be absorbed systemically from topical application, other drugs such as cimetidine, digoxin (LANOXIN®) and phenytoin (DILANTIN®) may **interact** with carmustine.

Call tumour group chair at (604) 877-6000 or 1-800-663-3333 with any problems or questions regarding this treatment program.

REFERENCES:

Zackheim HS. Topical carmustine (BCNU) in the treatment of mycosis fungoides. Dermatol Therapy 2003;16: 299-302.