BC Cancer Protocol Summary for Treatment of Advanced Indolent Lymphoma using Cyclophosphamide, vinCRIStine, predniSONE (CVP)

Protocol Code *LYCVP*

Tumour Group *Lymphoma*

Contact Physician *Dr. Laurie Sehn*

ELIGIBILITY:

Indolent T cell lymphoma or leukemia ; indolent B cell lymphoma which has been previously treated with rituximab +/- other chemotherapy within the past six months; unusual lymphoproliferative conditions such as multi-focal Castleman's disease, the histiocytosis or similar rare conditions; B cell lymphoma in patients with a contraindication to use of DOXOrubicin

- Stage IIA with more than 3 contiguous nodal sites of disease; IIB; III A or B; or IV A or B

TESTS:

- Baseline (required before first treatment): CBC and diff, platelets, bilirubin, ALT
- Baseline (required, but results do not have to be available to proceed with first treatment; results must be checked before proceeding with cycle 2): LDH, HBsAg, HBcoreAb
- Before each treatment: CBC and diff, platelets

PREMEDICATIONS:

- ondansetron 8 mg PO pre-chemotherapy
- dexamethasone 12 mg PO pre-chemotherapy

SUPPORTIVE MEDICATIONS:

If HBsAg or HBcoreAb positive, start lamiVUDine 100 mg PO daily for the duration of chemotherapy and continue for one year from treatment completion for patients who are HBsAg positive and for six months for patients who are HBcoreAb positive.

TREATMENT:

Drug	Dose	BC Cancer Administration Guideline
vinCRIStine	1.4 mg/m² on day 1 (no maximum dose)	in 50 mL NS over 15 mins
cyclophosphamide	1000 mg/m² on day 1	IV in 100 to 250 mL* NS over 20 min to 1 hour *Use 250 mL for dose greater than or equal to 1000 mg.
predniSONE	100 mg starting on day 1	PO daily in am with food x 5 consecutive days

Repeat every 21 or 28 days (see dose modifications) for up to a maximum of 8 cycles. For further use, Undesignated approval is required.

Activated: 3 Aug 1993 Revised: 1 Mar 2021 (revised lamivudine duration, added vincristine hepatotoxicity dose modifications)

DOSE MODIFICATIONS:

1. **Hematological**:

ANC (x 10^9/L)		Platelets (x 10^9/L)	Dose Modification
less than 1.2	or	less than 100	delay x 1 week

2. **Neurotoxicity**: vinCRIStine only

Toxicity	Dose Modification
Dysesthesias, areflexia only	100 %
Abnormal buttoning, writing	67%
Motor neuropathy, moderate	50%
Motor neuropathy, severe	Omit

3. **Hepatotoxicity**: vinCRIStine only

Bilirubin (micromol/L)	Dose Modification
Less than or equal to 25	100%
26 to 50	50%
Greater than 50	25%.

PRECAUTIONS:

1. **Neutropenia**: Fever or other evidence of infection must be assessed promptly and treated aggressively.
2. **Extravasation**: vinCRIStine causes pain and tissue necrosis if extravasated. Refer to BC Cancer Extravasation Guidelines.
3. **Hepatitis B Reactivation**: All lymphoma patients should be tested for both HBsAg and HBcoreAb. If either test is positive, such patients should be treated with lamiVUDine during chemotherapy and continue for one year from treatment completion for patients who are HBsAg positive and for six months for patients who are HBcoreAb positive. Such patients should also be monitored with frequent liver function tests and hepatitis B virus DNA at least every two months. If the hepatitis B virus DNA level rises during this monitoring, management should be reviewed with an appropriate specialist with experience managing hepatitis and consideration given to halting chemotherapy.

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