Systemic Therapy Education Bulletin

BC Cancer news and updates from across the province for Systemic Therapy teams

Provincial Systemic Therapy Drug Programs Under Consideration

The goal of the Education Bulletin is to support health care staff as they prepare for new treatments and to ensure safe patient care during the administration, distribution and management of new and complex treatments. These new drug treatments may also be delivered to patients prior to formal listing through manufacturer patient support programs or clinical trials. **Full details around the funded indications and eligibility criteria will be available in the Protocol Summaries and summarized in the Systemic Therapy Update newsletter once funding decisions have been finalized.** More details about the drugs, approved indications, and side effects can be found in the BC Cancer drug monographs, accessible from the Cancer Drug Manual Drug Index.

GIGAVTRIFT

Treatment Programs	Indication: Under Review (Refer to protocol for more details)	Associated Adverse Events
Trifluridine-tipiracil	Third line treatment of **Advanced Gastroesophageal Carcinoma**	Possible adverse events (**of any grade**): • Myelosuppression • Infections • Diarrhea • Fatigue • Pyrexia • Decreased appetite • Pneumonitis • Pulmonary embolism

Dosing and Administration Information

Premedications:

- **Antiemetic:** low emetogenic (see SCNAUSEA)

Dosing and Schedule: Cycle length = 28 days

- **Oral trifluridine-tipiracil** 35* mg/m^2 twice daily on days 1 – 5 and days 8 – 12
  * maximum dose 80 mg/dose; based on trifluridine component
  - Continue treatment until disease progression or unacceptable toxicity

Additional Protocol Information:

- **Dose Modification:**
  - **Dose level -1: Oral trifluridine-tipiracil** 30 mg/m^2
  - **Dose level -2: Oral trifluridine-tipiracil** 25 mg/m^2
  - **Dose level -3: Oral trifluridine-tipiracil** 20 mg/m^2
- Patients who received prior radiotherapy may be at higher risk of hematological and myelosuppression related adverse reaction including febrile neutropenia.
- Trifluridine-tipiracil is not recommended for use in pregnancy. Adequate contraception should be used by both sexes during treatment, and for at least 6 months after the last dose.

GUAVPEMAX

Treatment Programs	Indication: Under Review (Refer to protocol for more details)	Associated Adverse Events

Pembrolizumab
Plus
Axitinib
	Treatment of **Metastatic Renal Cell Carcinoma**	Possible adverse events (**of any grade**):
		• Immune-mediated adverse reactions (see SCIMMUNE Resources)
		• Infusion-related reactions
		• Diarrhea
		• Gastric perforation
		• Hypertension
		• Hepatic dysfunction
		• Cardiotoxicity
		• Thrombosis
		• Reversible posterior leukoencephalopathy syndrome
		• Hemorrhage events
		  ○ Cerebral hemorrhage
		  ○ Gastrointestinal hemorrhage
		  ○ Hematuria
		  ○ Hemoptysis
		  ○ Epistaxis

Dosing and Administration Information

Premedications:

- **Antiemetic:** low emetogenic (see SCNAUSEA)
- **Infusion reaction*:** If prior reactions to pembrolizumab:
  diphenhydramine 50 mg PO, acetaminophen 325 to 975 mg PO, and hydrocortisone 25 mg IV prior to treatment

* Does not require physician coverage during delivery

Dosing and Schedule:

- **Cycles 1 to 35* (pembrolizumab and axitinib combination treatment):** Cycle length = 3 weeks
  - **IV pembrolizumab** 2 mg/kg (max dose 200 mg) administer over 30 minutes
    - Use a 0.2 micron in-line filter

* Maximum of 2 years

Plus

  - **Oral axitinib** 5 mg twice daily continuously
- **Cycles 36 onwards (axitinib treatment):**
  - **Oral axitinib** 5 mg twice daily continuously
    - Continue treatment until disease progression or unacceptable toxicity

Additional Protocol Information:

- Optional weekly telephone nursing assessment for signs and symptoms of side effects while on treatment.
- For further information on management of immune-mediated adverse reactions, see BC Cancer Protocol SCIMMUNE Management of Immune-Mediated Adverse Reactions to Checkpoint Inhibitors Immunotherapy.
- **Axitinib drug Interactions:**
  - Screen for potential drug interactions between axitinib and cytochrome P450 3A4 interacting drugs

UBRAVPBFLV

Treatment Programs	Indication: Under Review (Refer to protocol for more details)	Associated Adverse Events
Palbociclib Plus Fulvestrant	Treatment of **Advanced Breast Cancer**	Possible adverse events (**of any grade**): • Nausea and vomiting • Myelosuppression • Renal dysfunction • Hepatic dysfunction • Fatigue • Infection • Diarrhea • Loss of appetite • Skin rash • Pulmonary embolism • Abdominal/back pain • Bone pain • Headache

Dosing and Administration Information

Premedications:

- Not required

Dosing and Schedule: Cycle length = 28 days

- **Oral palbociclib** 125 mg once daily for 21 days, followed by 7-day rest
  plus
- **IM fulvestrant** 500 mg
  - Cycle 1: on days 1, 15, and 29
  - Cycle 2 +: every 28 days (± 3 days)

Additional Protocol Information:

- **Dose modification:**
  - **Oral palbociclib** 100 mg once daily
  - **Oral palbociclib** 75 mg once daily
- **Drug Interactions:**
  - Palbociclib is metabolized via CYP3A enzymes. Concurrent use of CYP3A inhibitors, substrates or inducers may affect palbociclib serum level.
  - Grapefruit and grapefruit juice must be avoided for the duration of treatment.
- **For women needing chemically-induced menopause**
  - Buserelin* SC
    OR
  - Goserelin* SC
    OR
  - Leuprolide* IM

  * Treatment is started with a short-acting agent. Once response has been established, a long-acting formulation may be substituted at the physician's discretion.

SAAVERIB

Treatment Programs	Indication: Under Review (Refer to protocol for more details)	Associated Adverse Events
Eribulin	Palliative Therapy for **Metastatic Sarcoma**	Possible adverse events (**of any grade**): • Myelosuppression • QT/QTc interval prolongation • Peripheral neuropathy • Constipation • Nausea • Asthenia/fatigue • Hepatic dysfunction • Renal dysfunction • Hypercalcemia/hypocalcemia • Hyperkalemia/hypokalemia • Hypermagnesemia/hypomagnesemia • Dyspnea

Dosing and Administration Information

Premedications:

- **Antiemetic:** low emetogenic (see SCNAUSEA)

Dosing and Schedule: Repeat every 21 days until disease progression, no evidence of further response or unacceptable toxicity.

- **IV eribulin** 1.4 mg/m^2 on days 1 and 8
  - IV push over 2 to 5 minutes

Website Resources and Contact Information

CONTACT INFORMATION	EMAIL
To subscribe or update contact information, please contact:	
Provincial Systemic Therapy Program	ProvincialSystemicOffice@bccancer.bc.ca
Systemic Therapy Education Bulletin: http://www.bccancer.bc.ca/health-professionals/clinical-resources/systemic-therapy/education-bulletin	
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