Systemic Therapy Update



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For Health Professionals Who Care For Cancer Patients

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EDITOR'S CHOICE

New Programs

The Provincial Systemic Therapy Program has approved the following three programs effective 01 August 2013:

Genitourinary:

Cabazitaxel with Prednisone for Metastatic Castration Resistant Prostate Cancer (mCRPC) Progressing After Docetaxel (UGUPCABA) — Previously, abiraterone with prednisone (UGUPABI) was the treatment standard at the BCCA for mCRPC after progression on docetaxel. Cabazitaxel with prednisone is now approved as a treatment alternative to abiraterone in this patient population. Cabazitaxel is a tubulin-binding taxane drug that exhibits antitumour activity despite resistance to other taxanes such as paclitaxel and docetaxel. A phase III trial demonstrated improved survival with cabazitaxel plus prednisone compared with mitoxantrone plus prednisone in men with mCRPC who had progressed after docetaxel (median overall survival: 15.1 mo vs. 12.7 mo [HR 0.70, 95% CI 0.59-0.83]; median progression free survival: 2.8 mo vs. 1.4 mo [HR 0.74, 95% CI 0.64-0.86]). [de Bono et al. Lancet 2010;376:1147-54] Common adverse effects of cabazitaxel and prednisone include neutropenia, diarrhea, fatigue, asthenia, nausea and vomiting.

EDITOR'S CHOICE

Platinum and Etoposide for Genitourinary Small Cell Tumours (GUSCPE) – The previous BCCA treatment standard for genitourinary small cell tumours (both limited and extensive stage disease) requires concurrent radiation with chemotherapy (GUSCPERT). The intent of GUSPERT is generally curative. The new program (GUSCPE) offers an option without concurrent radiation in patients who have extensive stage disease only, where the treatment intent is palliative.

Head and Neck:

Cisplatin and Docetaxel for Incurable or Recurrent Squamous Cell Carcinoma of the Head and Neck (HNSCC) (HNAVPD) — Cisplatin with docetaxel is now approved as an alternative to the BCCA treatment standard of cisplatin and fluorouracil (5-FU). Phase II studies have consistently demonstrated response rates of 40% to 50%, and median overall survival of 9 to 11 months with the new platinum doublet. Pathologic response is important in HNSCC for palliation of locoregional symptoms. Cisplatin with docetaxel is a more convenient regimen to administer, and has a different toxicity profile than cisplatin with 5-FU.

References:

- 1. M Baur, HR Klenzer, J Schwelger, et al. Docetaxel/cisplatin as first-line chemotherapy in patients with head and neck carcinoma. Cancer 2002:94:2953-8.
- 2. F Caponigro, E Massa, L Manzione et al. Docetaxel and cisplatin in locally advanced or metastatic squamous-cell carcinoma of the head and neck: a phase II study of the Southern Italy Cooperative Oncology Group (SICOG). Ann Oncol 2001;12(2):199-202.
- 3. C Gedlicka, M Formanek, E Selzer, et al. Phase II study with docetaxel and cisplatin in the treatment of recurrent and/or metastatic squamous cell carcinoma of the head and neck. Oncology 2002;63(2):145-50.
- 4. BS Glisson, BA Murphy, G Frenette et al. Phase II trial of docetaxel and cisplatin combination chemotherapy in patients with squamous cell carcinoma of the head and neck. JCOO 2002;20(6):1593-9.
- 5. L Specht, S Kornum Larsen, H Sand Hanse. Phase II study of docetaxel and cisplatin in patients with recurrent or disseminated squamous-cell carcinoma of the head and neck. Ann Oncol 2000;11(7):845-9.

DRUG UPDATE

HEALTH CANADA ADVISORY - RITUXIMAB AND HEPATITIS B VIRUS RECURRENCE

Health Canada has recently issued an advisory alerting health professionals to the risk of Hepatitis B virus (HBV) reactivation in seropositive patients treated with rituximab. Health Canada recommends that <u>ALL</u> patients be screened for HBV prior to starting treatment with rituximab, and that consultation with a liver disease expert is recommended for seropositive patients to optimize ongoing monitoring and management. These recommendations are consistent with the information provided in the BCCA Cancer Drug Manual monograph for rituximab, and the rituximab-containing chemotherapy protocols for lymphoid malignancies (under the "Precautions" section).

For further information about the Health Canada advisory, please visit the <u>Health Canada Recalls and Alerts</u> website. An article titled "Hepatitis B Screening and Prophylaxis in Cancer Patients" was also published on the <u>January 2012</u> issue of the Systemic Therapy Update for those who would like to learn more about this topic.

CONTINUING PROFESSIONAL DEVELOPMENT

BCCA CONFERENCE 2013 – CANCELLED

The BC Cancer Agency Conference 2013 has been cancelled. Please see the <u>conference website</u> for further details.

BCCA EDUCATION PROGRAM FOR ONCOLOGY PHARMACISTS – AVAILABLE VIA LEARNING HUB

In 2009, the Canadian Association of Pharmacy in Oncology (CAPhO) conducted a needs assessment survey across the country to evaluate the educational needs of pharmacists practicing in oncology. The survey found that few oncology training programs or undergraduate courses were available to prepare pharmacists to practice in this area of subspecialty. The BCCA Education Program for Oncology Pharmacists is currently being developed by BCCA Pharmacy to meet this demand, incorporating the unique perspective of oncology pharmacy practice in British Columbia.

The BCCA Education Program for Oncology Pharmacists uses a structured educational framework to support the ongoing knowledge development of pharmacists in a variety of oncology topics so that they may gain the necessary knowledge, skills and ability to confidently provide safe and effective cancer care. It is a self-directed, online, non-accredited program that targets all levels of learners, from those new to oncology practice to advanced practitioners.

The program curriculum is divided into two levels which will consist of up to 50 learning modules.

- 1. <u>Core Clinical Practice (Level 1)</u> This level aims to help pharmacists new to oncology become familiar with the basic principles of cancer care and introduces them to core topics in oncology practice.
- 2. <u>Advanced Clinical Practice (Level 2)</u> This level aims to help more experienced oncology pharmacists further advance their clinical oncology knowledge, with the focus on evidence-based therapeutic topics.

The learning modules are accessible to all learners with internet access through the <u>Provincial Health</u> <u>Services Authority (PHSA) Learning Hub</u>. Access requirements and instructions can be found on the <u>program</u> webpage. Learners are free to select any module that they feel best match their learning needs. The estimated time to complete each module is indicated at the beginning of each lesson, and ranges between 2 and 5 hours. New modules will be implemented on the PHSA Learning Hub as soon as they become available.

What is Available Now?

Four learning modules in Level 1 are now available on the Core Clinical Practice (Level 1) webpage:

- 1. BCCA Website Navigation
- 2. Chemotherapy Orders: Clinical Assessment and Review
- 3. Lung Cancer
- 4. Oncology Basics (developed by CAPhO)

What is Coming Soon?

The following Level 1 learning modules are currently under development:

- 1. Drug Information
- 2. Drug Interactions in Oncology
- 3. Chemotherapy Preparation and Safe Handling
- 6. Routes of Administration and Complications
- 7. Breast Cancer
- 8. Colorectal Cancer

CONTINUING PROFESSIONAL DEVELOPMENT

- 4. Hematologic Adverse Effects and Management
- 5. Laboratory Monitoring

- 9. Prostate Cancer
- 10. Venous Thromboembolism

Once all Level 1 modules are completed, the development of Level 2 modules will be underway. Please refer to the program webpage periodically for updates.

If you have any questions or comments about this program, please contact Rhonda Kalyn, Program Editor, or Lynne Ferrier, Program Manager.

NATIONAL ONCOLOGY PHARMACY SYMPOSIUM (NOPS) 2013

Date: November 14-17, 2013

Location: Hyatt Regency Vancouver, Vancouver, BC Early Bird Registration Deadline: September 16, 2013

Website: http://www.capho.org/nops-2013

The 2013 National Oncology Pharmacy Symposium (NOPS) will be held in beautiful VANCOUVER!! NOPS is the leading edge annual educational event produced by the Canadian Association of Pharmacy in Oncology (CAPhO). The theme to this year's conference is "Many Paths, Many Journeys". Please visit the conference website for details about the program and speakers.

CANADIAN ASSOCIATION OF NURSES IN ONCOLOGY (CANO/ACIO) CONFERENCE 2013

Date: October 20-23, 2013

Location: Sheraton Wall Centre, Vancouver, BC Early Bird Registration Deadline: August 31, 2013

Website: http://www.cano-acio.ca/annual-conference-2013

The 25th annual CANO/ACIO conference will also be held in beautiful VANCOUVER!! The theme for this year's conference is "Inspiration-Innovation-Transformation!" The goals of the conference are to:

- 1. Be inspired, and be ready to inspire others in your daily practice
- 2. Learn about new innovations, and be ready to embrace innovation
- 3. Be prepared to transform others, and also yourself

CANCER DRUG MANUAL

NEW MONOGRAPHS AND PATIENT HANDOUTS

Pertuzumab Interim Monograph and Chemotherapy Preparation and Stability Chart (CPSC) have been completed. Pertuzumab is a recombinant humanized monoclonal antibody which targets HER-2 dimerization. Blocking HER-signalling downstream halts cell growth and initiates apoptosis. Pertuzumab binds to a different HER-2 antigenic region than trastuzumab, which may result in a more complete inhibition of HER-2 signalling when the two agents are used together. Like trastuzumab, infusion reactions have been reported with pertuzumab. It is not a benefit drug of the BCCA, and requires an application to the BCCA Compassionate Access Program (CAP).

CANCER DRUG MANUAL

REVISED MONOGRAPHS AND PATIENT HANDOUTS

Bevacizumab Monograph:

Side Effects – added necrotizing fasciitis to the Side Effects table to reflect a recent Health Canada warning

Degarelix Monograph:

■ Parenteral Administration — The subcutaneous administration section has been revised to include injection techniques intended to reduce the incidence of injection site reactions. The degarelix manufacturer, Ferring Inc., advises that the injection should be administered slowly, and that the needle must be left in place for 30 seconds before withdrawing slowly. This technique allows the degarelix molecules to aggregate and form a hydrogel depot in the subcutaneous layer, which minimizes back-leak through the puncture channel into the more sensitive cutaneous layer.

Gemcitabine Monograph:

Supply and Storage, Chemotherapy Preparation and Stability Chart (CPSC) – added ready-to-use liquid formulation

Thalidomide Monograph:

Side Effects – added secondary malignancies to the Side Effects table to reflect a recent Health
Canada warning

WRITING TEAM/EDITORIAL BOARD MEMBERSHIP

The Cancer Drug Manual (CDM) Writing Team and Editorial Board would like to bid farewell to exiting CDM writer, Karen Mason, who has ended her secondment and has returned to the Pharmacy team at Fraser Valley Centre. The team would like to extend its sincere thanks to Karen for her many contributions to the CDM over the past two years. The CDM writing team would also like to welcome Dawn Annable, a pharmacist from Vancouver Centre, to the writing team. Welcome Dawn!

BENEFIT DRUG LIST

New Programs

The following programs have been added to the Benefit Drug List effective 01 August 2013:

Protocol Title	Protocol Code	Benefit Status
Palliative Therapy for Metastatic Castration Resistant Prostate Cancer Using Cabazitaxel and predniSONE	UGUPCABA	Restricted
Therapy of Genitourinary Small Cell Tumours with a Platin and Etoposide	GUSCPE	Class I
Treatment of Recurrent or Metastatic Squamous Cell Carcinoma of the Head and Neck with Cisplatin and Docetaxel	HNAVPD	Class I

LIST OF NEW AND REVISED PROTOCOLS, PRE-PRINTED ORDERS AND PATIENT HANDOUTS

BC Cancer Agency Protocol Summaries, Provincial Pre-Printed Orders (PPPOs) and Patient Handouts are revised periodically. New, revised or deleted protocols, PPPOs and patient handouts for this month are listed below. Protocol codes for treatments requiring "Compassionate Access Program" (previously Undesignated Indications Request) approval are prefixed with the letter "**U**".

NEW PROTOCOLS,	PPPOs AND F	PATIENT HANI	DOUTS (AFFEC	TED DOCUMENTS ARE CHECKED):		
CODE	Protocol	PPPO	Patient Handout	Protocol Title		
UGUPCABA		$\overline{\checkmark}$		Palliative Therapy for Metastatic Castration Resistant Prostate Cancer using Cabazitaxel and predniSONE		
GUSCPE		$\overline{\checkmark}$		Therapy of Genitourinary Small Cell Tumours with a Platin and Etoposide		
HNAVPD			$\overline{\checkmark}$	Treatment of Recurrent or Metastatic Squamous Cell Carcinoma of the Head and Neck with Cisplatin and Docetaxel		
DEVICED -		_				
			HANDOUTS (A	FFECTED DOCUMENTS ARE CHECKED		
CODE	Protocol	PPPO	Handout	Changes	Protocol Title	
BRAVGEMP	V	V		Diluent for CARBOplatin updated, lower case drug name formatted	Palliative Therapy for Metastatic Breast Cancer using CISplatin and Gemcitabine	
CNB	Ø			Title and Eligibility clarified, contact physician updated	Therapy for Pituitary Adenomas using Bromocriptine	
CNCAB	Ø			Title and Eligibility clarified	Therapy for Pituitary Adenomas using Cabergoline	
CNQUIN	Ø			Title and Eligibility clarified	Therapy for Pituitary Adenomas using Quinagolide	
UGIGAVCCT	$\overline{\mathbf{V}}$			Minor typo corrected under Treatment	Palliative Treatment of Metastatic or Inoperable, Locally Advanced Gastric or Gastroesophageal Junction Adenocarcinoma using CISplatin, Capecitabine and Trastuzumab	
GOOVPLDC	$\overline{\mathbf{V}}$			Minor typo corrected under Eligibility	Second Line Treatment Using Pegylated Liposomal DOXOrubicin (PLD) and CARBOplatin for Epithelial Ovarian Cancer Relapsing after Primary Treatment	
GUPLHRHA	Ø	$\overline{\checkmark}$		Parenteral Administration section updated	Therapy for Advanced Prostate Cancer Using LHRH Antagonist Degarelix	
HNAVPD	Ø	Ø		Requirement for CAP removed from Eligibility, Protocol Code updated	Treatment of Recurrent or Metastatic Squamous Cell Carcinoma of the Head and Neck with Cisplatin and Docetaxel	
HNOTTSH	V			Eligibility clarified	Radioiodine Imaging in Patients with Thyroid Cancer using Thyrotropin Alpha	

REVISED Protocols, PPPOs and Patient Handouts (Affected Documents are Checked):					
CODE	Protocol	PPPO	Patient Handout	Changes	Protocol Title
LUSCPI				Drug interaction with diuretics removed	Second-Line Treatment of Extensive Stage Small Cell Lung Cancer (SCLC) with Irinotecan With or Without Platinum
ULYBEND	V			Eligibility updated	Treatment of Non-Hodgkin Lymphoma with Bendamustine
ULYBENDR				Eligibility updated	Treatment of Non-Hodgkin Lymphoma with Bendamustine and riTUXimab
ULYCLLBEND	\square			Eligibility updated	Treatment of Relapsed Chronic Lymphocytic Leukemia (CLL) with Bendamustine
LYFLUDR	Ø	Ø		Eligibility and treatment cycles clarified; need for peripheral blood lymphocyte count for rituximab updated	Treatment of Chronic Lymphocytic Leukemia or Prolymphocytic Leukemia with Fludarabine and riTUXimab
LYRITUX	Ø	Ø		Need for peripheral blood lymphocyte count for rituximab deleted; minor typo corrected in Tests	Treatment of Lymphoma with Single Agent riTUXimab
ULYRMTN				Need for peripheral blood lymphocyte count for rituximab delete	Maintenance riTUXimab for Indolent Lymphoma
USMAVVEM			$\overline{\mathbf{A}}$	Typo corrected	Treatment of BRAF V600 Mutation- Positive Unresectable or Metastatic Melanoma Using Vemurafenib

Website Resources and Contact Information				
WEBSITE RESOURCES www.bccancer.bc.ca				
Systemic Therapy Update	www.bccancer.bc.ca/HPI/ChemotherapyProtocols/stupdate			
Reimbursement & Forms: Benefit Drug List, Class II, Compassionate Access Program	www.bccancer.bc.ca/HPI/ChemotherapyProtocols/Forms			
Cancer Drug Manual	www.bccancer.bc.ca/cdm			
Cancer Management Guidelines	www.bccancer.bc.ca/CaMgmtGuidelines			
Cancer Chemotherapy Protocols, Pre-printed Orders, Protocol Patient Handouts	www.bccancer.bc.ca/ChemoProtocols			
Systemic Therapy Program Policies	www.bccancer.bc.ca/HPI/ChemotherapyProtocols/Policies			
CON Pharmacy Educators	http://www.bccancer.bc.ca/HPI/Pharmacy/ContactUs.htm			

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Library/Cancer Information	604.675.8003 Toll Free 888.675.8001 x 8003		requests@bccancer.bc.ca
Pharmacy Professional Practice	250. 519.5574		jkippen@bccancer.bc.ca
Nursing Professional Practice	604.877.6000 x 672623		ilundie@bccancer.bc.ca
OSCAR	888.355.0355	604.708.2051	oscar@bccancer.bc.ca
Compassionate Access Program (CAP)	604.877.6277	604.708.2026	<pre>cap_bcca@bccancer.bc.ca</pre>
Pharmacy Chemotherapy Certification	250.712.3900 x 686741		rxchemocert@bccancer.bc.ca
BCCA-Abbotsford Centre	604.851.4710 Toll Free 877.547.3777		
BCCA-Centre for the North	250.645.7300 Toll Free 888.775.7300		
BCCA-Fraser Valley Centre	604.930.2098 Toll Free 800.523.2885		
BCCA-Sindi Ahluwalia Hawkins Centre for the Southern Interior	250.712.3900 Toll Free 888.563.7773		
BCCA-Vancouver Centre	604.877.6000 Toll Free 800.663.3333		
BCCA-Vancouver Island Centre	250.519.5500 Toll Free 800.670.3322		

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