# Systemic Therapy Update



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# For Health Professionals Who Care For Cancer Patients

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#### **EDITOR'S CHOICE**

#### ADJUVANT ENDOCRINE THERAPY FOR EARLY BREAST CANCER

The Provincial Systemic Therapy Program has recently approved tamoxifen for up to 10 years in women with hormone receptor positive, stages 1 to 3 invasive breast cancer (BRAJTAM). Oncologists should evaluate the specific risks and benefits of continued tamoxifen beyond 5 years with their patients, and make individualized recommendations based on cancer recurrence risk, comorbidities and side effects. Please see the <u>June 2013</u> issue of the Systemic Therapy Update for further information on this newly approved program.

To guide selection of therapy, the following table summarizes the current BCCA approved endocrine treatment options in postmenopausal, hormone-receptor positive early breast cancer.

Table 1. BCCA approved endocrine treatment options in years 6 to 10 according to endocrine treatment given in the first 5 years for early breast cancer.

## **EDITOR'S CHOICE**

Years 1 to 5	Years 6 to 10		
Tamoxifen only	Discontinue, or		
	Tamoxifen for up to another 5 yrs*, or		
	*Eligible if patients completed first 5 years of upfront		
	tamoxifen within the last 12 months.		
	*Most appropriate option for women who are still		
	premenopausal after 5 years of adjuvant tamoxifen.		
	*Can be considered for any postmenopausal patient with		
	hormone receptor positive invasive breast cancer, including		
	those who are intolerant to Aromatase Inhibitors (Als).		
	Letrozole up to 5 yr**		
	**Can be considered for any postmenopausal patient with		
	hormone receptor positive invasive breast cancer, but benefits		
	are greatest among women with highest risk disease:		
	■ Node positive, or		
	<ul><li>Large, high-grade, node-negative, or</li></ul>		
	Locally advanced		
AI only	Discontinue		
Tamoxifen then Al	Discontinue		
AI then Tamoxifen	Discontinue		

The Breast Tumour Group recommends 8 to 10 years of total endocrine therapy, particularly in women with good general health, adequate tolerance of side effects, and higher risk for breast cancer recurrence. Tamoxifen for up to 10 years is the treatment standard for premenopausal women. For postmenopausal women who have completed 5 years of tamoxifen, options for extended therapy include up to another 5 years of therapy with either letrozole or tamoxifen. Based on the lack of supporting evidence, all other combinations or durations of endocrine therapy that are not listed in the table above are not currently funded by the BCCA, and will require Compassionate Access Program (CAP) approval.

# HIGHLIGHTS OF CHANGES IN PROTOCOLS, PRE-PRINTED ORDERS AND PATIENT HANDOUTS

Removal of Calcium and Magnesium from Oxaliplatin-Containing Protocols and PPPOs:

All oxaliplatin-containing chemotherapy protocols and PPPOs have been updated to remove the recommendations for the optional use of intravenous (IV) calcium gluconate and magnesium sulfate preand post-oxaliplatin infusion for the prevention of oxaliplatin-associated peripheral neuropathy. This practice change resulted from a randomized controlled trial that evaluated the rate of oxaliplatin-associated sensory neurotoxicity across 3 treatment arms: [Loprinzi et al. J Clin Oncol 2013;31:suppl; abstr 3501]

- 1) IV calcium and magnesium pre- and post-oxaliplatin
- 2) Placebo pre- and post-oxaliplatin
- 3) IV calcium and magnesium pre- and placebo post-oxaliplatin

The study found no statistically significant differences in cumulative sensory neurotoxicity between the three groups. Cumulative sensory neurotoxicity was measured using the sensory subscale of the EORTC QLQ-CIPN20 questionnaire.

## **PROVINCIAL SYSTEMIC THERAPY POLICY**

## **UPDATES TO BCCA COMPASSIONATE ACCESS PROGRAM (CAP) POLICY**

Highlights of changes to the BCCA Compassionate Access Program (CAP) Policy (III-45) include:

- 1. Clarification of clinical scenarios where the use of Class I drugs require a CAP application:
  - When a Class I drug is used "in combination with other Class I drug(s) for which no BCCA protocol exists, unless each of the drugs being used is within the same tumour site and has the same default code (e.g. XXNOS)"
  - "Where there is limited information available to support a clinical review for appropriateness and safety"
- 2. Modification to the appeal process:
  - In the past, appeals were routinely forwarded to a reviewer different from the one who had denied the original request. Under the revised policy, depending on the information received, the appeal (accompanied by new clinical information and/or literature evidence) may be reviewed by the same or a different Tumour Group designate, with the Provincial Systemic Therapy Program designate rendering the final decision.

## **MEDICATION SAFETY CORNER**

#### **UPDATES TO BCCA TALLMAN LETTERING PHARMACY DIRECTIVE**

In 2011, the BCCA implemented the Provincial Pharmacy Directive "Use of TALLman Lettering for Medication Nomenclature" to help prevent errors stemming from look-alike/sound-alike drugs. The directive has been updated to reflect current recommendations from the Institute for Safe Medication Practices (ISMP) Canada and ISMP US.<sup>1,2</sup>

Key updates include:

- 1. Expansion of the TALLman lettering list to include non-oncology drugs used at the BCCA (i.e. HYDROmorphone/morphine, metroNIDAZOLE/metFORMIN)
- 2. Clarification of when the use of TALLman lettering is recommended
- 3. Reminder that medications not on the TALLman list should be expressed in lower case

BCCA staff may access this directive in the BCCA internal drive at: <a href="https://docs.org/linearing-nc-ed-2011">https://docs.org/linearing-nc-ed-2011</a> internal drive at: <a href="https://docs.org/linearing-nc-ed-2012">https://docs.org/linearing-nc-ed-2012</a> issue of the Systemic Therapy Update.

#### References:

- 1. ISMP Canada safety bulletin. November 11, 2010;10(8):1-4. Available at: <a href="www.ismp-canada.org/download/safetyBulletins">www.ismp-canada.org/download/safetyBulletins</a>
- ISMP US: FDA and ISMP lists of look-alike drug names with recommended tall man letters. 2011. Available at: www.ismp.org/tools

## **DRUG UPDATE**

#### **IMATINIB DISPENSING**

Several generic forms of imatinib have recently become available and are currently being evaluated. At this time, the Leukemia/BMT Program of BC recommends that <u>ONLY</u> the brand name formulation (GLEEVEC<sup>®</sup>) should be dispensed for imatinib prescriptions until further notice. BCCA will continue to reimburse the acquisition cost of GLEEVEC<sup>®</sup> by Novartis for approved indications on the Benefit Drug List. The BCCA will provide further notification if more information becomes available.

#### THYROTROPIN-ALFA SHORTAGE RESOLVED

The drug shortage of thyrotropin-alfa (THYROGEN®) has been resolved. Therefore, BCCA Compassionate Access Program (CAP) approval is no longer required for indications specified on the HNOTTSH chemotherapy protocol. Please be reminded that thyrotropin-alfa is not funded for long-term use in patients with no evidence of disease and very low risk of disease recurrence.

## 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 Patient Handouts (Affected Documents are Checked):				
CODE	Protocol	PPPO	Patient Handout	Protocol Title
UGOOVDDCAT			$\overline{\checkmark}$	Treatment Of Advanced Epithelial Ovarian, Primary Peritoneal, or Fallopian Tube Carcinoma Using CARBOplatin and Weekly PACLitaxel

REVISED PROTOCOLS, PPPOS AND PATIENT HANDOUTS (AFFECTED DOCUMENTS ARE CHECKED):					
CODE	Protocol	PPPO	Patient Handout	Changes	Protocol Title

REVISED PROTOCOLS, PPPOS AND PATIENT HANDOUTS (AFFECTED DOCUMENTS ARE CHECKED):					
CODE	Protocol	PPPO	Patient Handout	Changes	Protocol Title
BRAJLET	$\square$			Treatment section clarified	Adjuvant Letrozole for Breast Cancer
BRAJTAM	$\square$			Eligibility section clarified	Adjuvant Therapy for Breast Cancer using Tamoxifen
GIAJFFOX	V			Dose Modifications section clarified	Adjuvant Combination Chemotherapy for Stage III and Stage IIB Colon Cancer Using Oxaliplatin, Fluorouracil and Folinic Acid (Leucovorin)
GIAVCETIR				Observation monitoring requirements clarified	Third Line Treatment of Metastatic Colorectal Cancer Using Cetuximab in combination with Irinotecan
GIFFIRB	Ø	Ø		Eligibility criteria expanded	Palliative Combination Chemotherapy for Metastatic Colorectal Cancer Using Irinotecan, Fluorouracil, Folinic Acid (Leucovorin) and Bevacizumab
GIFOLFIRI	V	Ø		Eligibility criteria expanded	Palliative Combination Chemotherapy for Metastatic Colorectal Cancer Using Irinotecan, Fluorouracil and Folinic Acid (Leucovorin)
GIFOLFOX	Ø	Ø		Eligibility criteria expanded	Palliative Combination Chemotherapy for Metastatic Colorectal Cancer Using Oxaliplatin, Fluorouracil and Folinic Acid (Leucovorin)
UGIFFOXB	Ø			Eligibility criteria expanded	Palliative Combination Chemotherapy for Metastatic Colorectal Cancer Using Oxaliplatin, Fluorouracil, Folinic Acid (Leucovorin) and Bevacizumab
GIRAJCOX	V			Starting dose in the Treatment section clarified	Adjuvant Combination Chemotherapy for Stage III Rectal Cancer Using Oxaliplatin and Capecitabine
GIRAJFFOX	V			Starting dose in the Treatment section, and Dose Modifications section clarified	Adjuvant Combination Chemotherapy for Stage III Rectal Cancer Using Oxaliplatin, Fluorouracil and Folinic Acid (Leucovorin)
GOBEP	$\square$	Ø		Tests and Hydration sections clarified; Contact Physician updated	Therapy of Non-Dysgerminomatous Ovarian Germ Cell Cancer Using Bleomycin, Etoposide and CISplatin
GOENDCAT	V			Tests section clarified to required baseline tumour markers only if clinically indicated	Treatment of Primary Advanced or Recurrent Endometrial Cancer using CARBOplatin and PACLitaxel

REVISED PROTOCOLS, PPPOS AND PATIENT HANDOUTS (AFFECTED DOCUMENTS ARE CHECKED):						
CODE	Protocol	PPPO	Patient Handout	Changes	Protocol Title	
UGOOVDDCAT				Premedications section clarified	Treatment of Advanced Epithelial Ovarian, Primary Peritoneal, or Fallopian Tube Carcinoma Using CARBOplatin and Weekly PACLitaxel	
GOOVLDOX		Ø		Class II Eligibility clarified	Treatment of Relapsed/Progressing, Epithelial Ovarian, Primary Peritoneal or Fallopian Tube Carcinoma Using Pegylated Liposomal DOXOrubicin	
GOOVPLDC	Ø	Ø		Volume of diluent for doxorubicin clarified	Second line treatment for Epithelial Ovarian Cancer Relapsing after primary treatment using Pegylated Liposomal DOXOrubicin (PLD) and CARBOplatin	
HNOTTSH	$\overline{\mathbf{A}}$			Eligibility section clarified	Radioiodine Imaging in Patients with Thyroid Cancer using Thyrotropin Alpha	
ULKMDSA	$\overline{\checkmark}$			Treatment cycles clarified	Therapy of Myelodysplastic Syndrome using Azacitidine	

	IN-CONTAINING CHEMOTHERAPY PROTOCOLS AND PPPOS HAVE BEEN UPDATED TO REMOVE THE OPTIONAL IMPORTANCE AND MAGNESIUM SULFATE PREVIOUSLY RECOMMENDED FOR OXALIPLATIN-ASSOCIATED
CODE	Protocol Title
GIAJCAPOX	Adjuvant Combination Chemotherapy for Stage III and Stage IIB Colon Cancer Using Oxaliplatin and Capecitabine
GIAJFFOX	Adjuvant Combination Chemotherapy for Stage III and Stage IIB Colon Cancer Using Oxaliplatin, Fluorouracil and Folinic Acid (Leucovorin)
GIFOLFOX	Palliative Combination Chemotherapy for Metastatic Colorectal Cancer Using Oxaliplatin, Fluorouracil and Folinic Acid (Leucovorin)
GIRAJCOX	Adjuvant Combination Chemotherapy for Stage III Rectal Cancer Using Oxaliplatin and Capecitabine
GIRAJFFOX	Adjuvant Combination Chemotherapy for Stage III Rectal Cancer Using Oxaliplatin, Fluorouracil and Folinic Acid (Leucovorin)
UGICAPOX	Palliative Combination Chemotherapy for Metastatic Colorectal Cancer Using Oxaliplatin and Capecitabine
UGICOXB	Palliative Combination Chemotherapy for Metastatic Colorectal Cancer Using Oxaliplatin, Bevacizumab and Capecitabine
UGIFFOXB	Palliative Combination Chemotherapy for Metastatic Colorectal Cancer Using Oxaliplatin, Fluorouracil, Folinic Acid (Leucovorin) and Bevacizumab
UGIFIRINOX	Palliative Combination Chemotherapy for Metastatic Pancreatic Adenocarcinoma Using Irinotecan, Oxaliplatin, Fluorouracil and Folinic Acid (Leucovorin)

	IDOUTS FOR THE FOLLOWING IRINOTECAN-CONTAINING CHEMOTHERAPY PROTOCOLS HAVE BEEN UPDATED TO UG INTERACTION WITH DIURETICS AS THIS IS AN ADDITIVE SIDE EFFECT RATHER THAN A DRUG INTERACTION:
CODE	Protocol Title
GIAVCETIR	Third Line Treatment of Metastatic Colorectal Cancer Using Cetuximab in combination with Irinotecan
UGICAPIRI	Palliative Combination Chemotherapy for Metastatic Colorectal Cancer Using Irinotecan and Capecitabine in Patients Unsuitable for GIFOLFIRI
UGICIRB	Palliative Combination Chemotherapy for Metastatic Colorectal Cancer Using Irinotecan, Bevacizumab and Capecitabine
GIFFIRB	Palliative Combination Chemotherapy for Metastatic Colorectal Cancer Using Irinotecan, Fluorouracil, Folinic Acid (Leucovorin) and Bevacizumab
UGIFIRINOX	Palliative Combination Chemotherapy for Metastatic Pancreatic Adenocarcinoma Using Irinotecan, Oxaliplatin, Fluorouracil and Folinic Acid (Leucovorin)
GIFOLFIRI	Palliative Combination Chemotherapy for Metastatic Colorectal Cancer Using Irinotecan, Fluorouracil and Folinic Acid (Leucovorin)
GIGFOLFIRI	Palliative Combination Chemotherapy for Metastatic Gastric or Esophageal Adenocarcinoma Using Irinotecan, Fluorouracil and Folinic Acid (Leucovorin)
GIIR	First- or Second-Line Palliative Chemotherapy for Metastatic Colorectal Cancer Using Irinotecan
GIIRINALT	Second-Line Treatment for Fluorouracil Refractory Metastatic Colorectal Cancer Using Weekly Scheduled Irinotecan

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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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	cap bcca@bccancer.bc.ca
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	250.712.3900		
Southern Interior	Toll Free 888.563.7773		
BCCA-Vancouver Centre	604.877.6000 Toll Free 800.663.3333		
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