

For Health Professionals Who Care for Cancer Patients

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Editor's Choice

New Programs

Effective 01 October 2023, the BC Cancer Provincial Systemic Therapy Program has approved the following new treatment programs. The full details of these programs can be found on the BC Cancer website in the [Chemotherapy Protocols](#) section.

New Programs

Gynecological

Pembrolizumab with Lenvatinib for Endometrial Cancer Without Microsatellite Instability-High (MSI-H) or Mismatch Repair Deficiency (dMMR) (GOENDAVPL, GOENDAVPL6) – The BC Cancer Gynecological Tumour Group is introducing pembrolizumab with lenvatinib (PEM-LEN) for advanced endometrial carcinoma without MSI-H or dMMR in patients progressing after platinum-based therapy. In the phase III KEYNOTE-775 trial comparing to chemotherapy, PEM-LEN was shown to increase overall survival (17.4 vs. 12.0 months), hazard ratio [HR] 0.68, progression-free survival (6.6 vs. 3.8 months, HR 0.60), and overall response rate (30.3% vs. 15.1%).

Grade 3 or higher adverse events were more common than with chemotherapy (88.9% vs. 72.7%), primarily driven by hypothyroidism, hyperthyroidism, and hypertension. However, they are consistent with the known safety profile and generally manageable with dose reduction (66.5% of lenvatinib), interruption (69.2% of one or both drugs), and discontinuation (lenvatinib 30.8%, pembrolizumab 18.7%, both drugs 14.0%).[1]

Genitourinary

Pembrolizumab with Lenvatinib for Metastatic Renal Cell Carcinoma (GUAVPEML, GUAVPEML6) – The BC Cancer Genitourinary Tumour Group is introducing pembrolizumab with lenvatinib (PEM-LEN) for patients with advanced or metastatic renal cell carcinoma (RCC) with no prior systemic therapy for metastatic disease. In the phase III CLEAR trial comparing to sunitinib, PEM-LEN was shown to increase overall survival (hazard ratio [HR] 0.66), progression-free survival (23.9 vs. 9.2 months, HR 0.39), and overall response rate (30.3% vs. 15.1%).

Grade 3 or higher adverse events were more common than with sunitinib (82.4% vs. 71.8%). However, they are consistent with the known safety profile and generally manageable with dose reduction (68.8% of lenvatinib), interruption (78.4% of one or both drugs), and discontinuation (lenvatinib 25.6%, pembrolizumab 28.7%, both drugs 13.4%). Patients treated with PEM-LEM appeared to have better maintenance of health-related quality of life and less severe symptoms compared with sunitinib.[2]

Myeloma

Selinexor in Combination with Bortezomib and Dexamethasone With or Without Cyclophosphamide for Treatment of Multiple Myeloma (MYBSD) – The BC Cancer Myeloma Tumour Group is introducing selinexor in combination with bortezomib and dexamethasone for patients with multiple myeloma who have received at least one prior therapy. In the phase III BOSTON study, the addition of selinexor to bortezomib and dexamethasone was shown to improve progression-free survival (13.93 vs. 9.46 months). Toxicities include thrombocytopenia, gastrointestinal toxicities (e.g., diarrhea, nausea, and vomiting), decreased appetite and weight, and ocular toxicities (e.g., cataracts). Although selinexor is an oral agent, it requires significant supportive care including routine prophylactic antiemetics prior to and during treatment with selinexor. Nausea and vomiting was reported in 50% (\geq Grade 3, 8%) and 21% (\geq Grade 3, 4%) of patients respectively despite widespread use of prophylactic antiemetics.[3]

Editor's Choice

New Programs

Sarcoma

Ripretinib Therapy for Advanced Gastrointestinal Stromal Cell Tumours (GIST) (SAVGRIP) – The BC Cancer Sarcoma Tumour Group is introducing ripretinib for advanced GIST in patients who have received prior treatment with imatinib, sunitinib, and regorafenib. In the phase III INVICTUS study comparing to placebo, ripretinib was shown to improve progression-free survival (27.6 vs. 4.1 weeks, hazard ratio 0.15) and a potential trend to longer overall survival. Toxicities seem to be consistent with other members of the drug class, and include peripheral edema, hypertension, palmar plantar erythrodysesthesia, arthralgia, myalgia, and increased bilirubin.[4]

References

1. Makker V, Colombo N, Casado Herráez A, et al. Lenvatinib plus pembrolizumab for advanced endometrial cancer. *N Engl J Med* 2022;386(5):437-48.
2. Motzer R, Alekseev B, Rha SY, et al. Lenvatinib plus pembrolizumab or everolimus for advanced renal cell carcinoma. *N Engl J Med* 2021;384(14):1289-300.
3. CADTH Reimbursement Recommendation. Selinexor (Xpovio): multiple myeloma. August 2022.
4. CADTH Reimbursement Recommendation. Ripretinib (Qinlock): for the treatment of adult patients with advanced gastrointestinal stromal tumour who have received prior treatment with imatinib, sunitinib, and regorafenib. May 2022.

Update on DPYD Genotyping for Patients Treated with Fluorouracil and Capecitabine

DPYD genotyping test has been available since May and added as baseline tests for all treatment protocols with fluorouracil and capecitabine. Note that *DPYD* genotyping test is NOT required if:

1. Patient has previously tolerated to fluorouracil or capecitabine, or
2. Patient has previously tested for *DPYD* genotyping.

Highlights of Revised Protocols and PPPOs

Revisions – SCDRUGRX PPPO B - Subsequent Cycles

The BC Cancer Provincial Systemic Therapy Program is launching revisions to the existing SCDRUGRX PPPO B – Subsequent Cycles. An internal feedback process identified areas to improve clarity and strengthen the purpose of PPPO B. All revisions are highlighted in blue.

We welcome additional feedback which may be submitted through your regional systemic therapy teams or to the Provincial Systemic Therapy Office: ProvincialSystemicOffice@bccancer.bc.ca

Revised Practice Standards and Policies

Updated: Pharmacy Practice Standards for Hazardous Drugs

Revised Practice Standards and Policies

Updated: Pharmacy Practice Standards for Hazardous Drugs

BC Cancer [Pharmacy Practice Standards for Hazardous Drugs Manual](#) has been updated in response to the National Association of Pharmacy Regulatory Authorities (NAPRA) Model Standards for Pharmacy Compounding publications.

Key updates include:

- Introduction- addition of information about gloved fingertip sampling and media fill tests.
- Module 1- updates to information regarding rooms and equipment in the controlled area, medical masks, hand cleansing, and compounding.
- Module 1 Checklists- updates to several checklists and a new checklist has been developed.
- Glossary- definitions have been updated, added or deleted.
- Standards Summary- changes corresponding to the standards updates made to Module 1.

Updates are highlighted in yellow. Any questions or concerns regarding these updates may be directed to BC Cancer's Pharmacy Oncology Certification Program team at rxchemocert@bccancer.bc.ca.

Updated: High Alert Medication Policy

The audit frequency has been changed to once a year.

Continuing Education

Family Practice Oncology Network Continuing Medical Education

The Family Practice Oncology Network (FPON) is pleased to announce a complimentary accredited webinar session on **'Prostate Cancer Screening and Early Prostate Cancer Management'** on **Thursday, October 19th, from 8 am to 9 am**, as part of the ongoing Complimentary Accredited Webinar Series. This session will cover:

- Current prostate cancer screening recommendations;
- The diagnostic process; and
- Management options for early prostate cancer

This session is offered at **no charge** and is accredited at up to 1.0 Mainpro+ credit.

For more information and links to registration, visit the FPON Continuing Medical Education site at fpon.ca or <https://ubccpd.ca/learn/learning-activities/course?eventtemplate=600-fpon-webinar-prostate-cancer-screening-and-early-prostate-cancer-management>

All documents are available in the [Cancer Drug Manual[®]](#) on the BC Cancer website.

New Documents

Selinexor Monograph and **Patient Handout** have been developed. Expert review was provided by Dr. Christopher Venner (medical oncologist, BC Cancer Myeloma Tumour Group) and Megan Darbyshire (tumour group pharmacist, BC Cancer Provincial Pharmacy). Selinexor is an orally administered Selective Inhibitor of Nuclear Export (SINE). Selinexor is used in the treatment of multiple myeloma in combination with bortezomib and dexamethasone. The usual dosing is 100 mg PO on day 1 of each week.

Highlights from these documents include:

- nausea, vomiting, anorexia and weight loss have been reported; patients are advised to maintain adequate caloric and fluid intake throughout treatment
 - Selinexor is classified as *highly emetogenic* and adequate anti-emetic premedication must be in place prior to treatment with selinexor.
- serious infections may occur with selinexor and most events are not associated with severe neutropenia
- new or worsening cataracts have been reported with selinexor alone and in combination with bortezomib and dexamethasone; if cataract surgery is required, withhold selinexor for 24 hours prior to surgery and 72 hours after

Selinexor has been added to the **Auxiliary Label List** and has been evaluated for the **BC Health Authorities Provincial Hazardous Drug List**.

Note that the following drugs are not BC Cancer Benefit Drugs and require application to the BC Cancer Compassionate Access Program (CAP). The corresponding Interim Monographs and Chemotherapy Preparation and Stability Chart entries are made available for reference only.

Teclistamab Interim Monograph has been developed. Teclistamab is a bispecific T-cell engager that targets B cell maturation antigen (BCMA) expressed on multiple myeloma cells and CD3 receptors expressed on T cells. It is used in the treatment multiple myeloma. Teclistamab is given by subcutaneous injection. Dosing follows a step-up dosing regimen for the first cycle, with doses given on days 1, 3, and 5. The usual dose for cycle 2 onwards is 1.5 mg/kg given once weekly in a 4-weekly cycle.

Highlights from this document include:

- cytokine release syndrome (CRS) and immune effector cell-associated neurotoxicity syndrome (ICANS) have been reported with teclistamab, which may require administration of the set-up dosing as inpatients
- premedication with corticosteroid, antihistamine, and antipyretic is recommended prior to all step-up doses and first full treatment dose to reduce the risk of CRS
- antimicrobial/antiviral prophylaxis may be required to prevent reactivation of infections such as Hepatitis B and herpes zoster
- T-cell activation and cytokine release induced by teclistamab may compromise pregnancy; infants exposed to teclistamab *in utero* may develop hypogammaglobulinemia

Cancer Drug Manual[®]

Teclistamab has been added to the **Chemotherapy Preparation and Stability Chart** and has been evaluated for the **BC Health Authorities Provincial Hazardous Drug List**.

Revised Documents

Enzalutamide Monograph and Patient Handout

Cautions: updated *Interactions* bullet; updated *Pregnancy, Fertility, and Breastfeeding*

Supply and Storage: updated packaging information

Dosage Guidelines: updated statement regarding dose modifications due to interactions; deleted statement to refer to appendix for dose modifications for myelosuppression

Patient Handout: updated throughout as per current template language

Ripretinib Monograph and Patient Handout

Dosage Guidelines: bolded and italicized BC Cancer standard dosing and added BC Cancer protocol SAAVGRIP to references; deleted statement to refer to appendix for dose modifications for myelosuppression

Bag Size Selection Table

Polatuzumab vedotin: lower limit for 50 mL bag expanded to 42 mg, higher limit for 250 mL bag expanded to 860 mg

Benefit Drug List

New Programs

Effective 01 October 2023, the following new treatment programs have been added to the BC Cancer Benefit Drug List:

Protocol Title	Protocol Code	Benefit Status
Treatment of Endometrial Cancer Without Microsatellite Instability-High or Mismatch Repair Deficiency using Pembrolizumab and Lenvatinib	GOENDAVPL	Class I
Treatment of Endometrial Cancer Without Microsatellite Instability-High or Mismatch Repair Deficiency using 6-weekly Pembrolizumab and Lenvatinib	GOENDAVPL6	Class I
Treatment of Metastatic Renal Cell Carcinoma using Pembrolizumab and Lenvatinib	GUAVPEML	Class I
Treatment of Metastatic Renal Cell Carcinoma using 6-weekly Pembrolizumab and Lenvatinib	GUAVPEML6	Class I
Treatment of Multiple Myeloma using Bortezomib , Selinexor , and Dexamethasone With or Without Cyclophosphamide	MYBSD	Class I

Benefit Drug List

Fourth-Line Therapy of Advanced Gastrointestinal Stromal Cell Tumours (GIST) Using **Ripretinib**

SAAVGRIP

Class I

List of Revised Protocols, Pre-Printed Orders and Patient Handouts

BC Cancer 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, with document revisions indicated in the respective columns. Protocol codes for treatment requiring BC Cancer Compassionate Access Program approval are prefixed with the letter **U**.

NEW Protocols, PPPOs and Patient Handouts (*new documents checked*)

Code	Protocol Title	Protocol	PPPO	Handout
GOENDAVPL	Treatment of Endometrial Cancer Without Microsatellite Instability-High or Mismatch Repair Deficiency using Pembrolizumab and Lenvatinib	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--
GOENDAVPL6	Treatment of Endometrial Cancer Without Microsatellite Instability-High or Mismatch Repair Deficiency using 6-weekly Pembrolizumab and Lenvatinib	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--
GUAVPEML	Treatment of Metastatic Renal Cell Carcinoma using Pembrolizumab and Lenvatinib	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--
GUAVPEML6	Treatment of Metastatic Renal Cell Carcinoma using 6-weekly Pembrolizumab and Lenvatinib	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--
MYBSD	Treatment of Multiple Myeloma using Bortezomib, Selinexor, and Dexamethasone With or Without Cyclophosphamide	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
SAAVGRIP	Fourth-Line Therapy of Advanced Gastrointestinal Stromal Cell Tumours (GIST) Using Ripretinib	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	--

REVISED Protocols, PPPOs and Patient Handouts (*revisions in respective columns*)

Code	Protocol Title	Protocol	PPPO	Handout
BR Breast				

REVISED Protocols, PPPOs and Patient Handouts (*revisions in respective columns*)

Code	Protocol Title	Protocol	PPPO	Handout
BRAJLHRHAI	Neoadjuvant or Adjuvant Ovarian Suppression and Aromatase Inhibitor in Premenopausal Women with High Risk Early Stage Breast Cancer	<i>treatment updated</i>	<i>buserelin option revised</i>	--
BRAJLHRHT	Neoadjuvant or Adjuvant Therapy for Breast Cancer using a LHRH Agonist and Tamoxifen	<i>treatment updated</i>	<i>buserelin option revised</i>	--
BRAJPEM	Adjuvant Treatment of Resected Triple Negative Breast Cancer using Pembrolizumab	<i>eligibility updated</i>	--	--
BRAVLHRHAI	Therapy for Advanced Breast Cancer using a LHRH Agonist and an Aromatase Inhibitor	<i>treatment updated</i>	<i>buserelin option revised</i>	--
BRAVLHRHT	Palliative Therapy for Breast Cancer using a LHRH agonist and Tamoxifen	<i>treatment updated</i>	<i>buserelin option revised</i>	--
BRAVRBFLV	Therapy of Advanced Breast Cancer using Ribociclib and Fulvestrant With or Without LHRH Agonist	<i>tests clarified</i>	<i>tests clarified</i>	--
BRAVRIBAI	Therapy of Advanced Breast Cancer using Ribociclib and Aromatase Inhibitor With or Without LHRH Agonist	<i>tests clarified</i>	<i>tests clarified</i>	--
BRPCTAC	NEOAdjuvant Therapy for Triple Negative Breast Cancer using Pembrolizumab with CARBOplatin and Weekly PACLitaxel Followed by DOXOrubicin and Cyclophosphamide	<i>eligibility updated</i>	--	--
BRPCWTAC	NEOAdjuvant Therapy for Triple Negative Breast Cancer using Pembrolizumab, Weekly CARBOplatin and Weekly PACLitaxel, Followed by DOXOrubicin and Cyclophosphamide	<i>eligibility updated</i>	--	--
UBRAVTTCAP	Palliative Therapy for Metastatic Breast Cancer using Trastuzumab, Tucatinib, and Capecitabine	<i>eligibility updated, and trastuzumab loading dose clarified</i>	--	--
GI Gastrointestinal				
GIBAJCAP	Adjuvant Therapy of Biliary Cancer using Capecitabine	<i>eligibility, exclusions, tests and treatment clarified</i>	<i>tests clarified</i>	<i>title updated</i>
GO Gynecological				
UGOCXCATBP	Primary Treatment of Squamous, Adenocarcinoma, or Adenosquamous Cancer of the Cervix with Bevacizumab, CARBOplatin, PACLitaxel and Pembrolizumab	--	<i>RTC clarified</i>	--

REVISED Protocols, PPPOs and Patient Handouts (*revisions in respective columns*)

Code	Protocol Title	Protocol	PPPO	Handout
UGOCXCATP	Primary Treatment of Squamous, Adenocarcinoma, or Adenosquamous Cancer of the Cervix with CARBOplatin, PACLitaxel, and Pembrolizumab	--	<i>RTC clarified</i>	--
GOOVNIRM	Maintenance Treatment of Newly Diagnosed Platinum Responsive Epithelial Ovarian Cancer using Niraparib	--	<i>dose clarified</i>	--
GOOVNIRAM	Maintenance Treatment of Relapsed Platinum Sensitive and Responsive Epithelial Ovarian Cancer using Niraparib	--	<i>dose clarified</i>	--
GU Genitourinary				
GUAVPemax	Treatment of Metastatic Renal Cell Carcinoma Using Pembrolizumab and aXitinib	<i>eligibility updated</i>	--	--
GUCABO	Therapy for Metastatic Renal Cell Carcinoma Using Cabozantinib	<i>eligibility updated</i>	--	--
LU Lung				
LUAVPMBM	Maintenance Therapy of Advanced Non-Small Cell Lung Cancer with Pembrolizumab	<i>tests revised</i>	--	--
LUAVPMBM6	Maintenance Therapy of Advanced Non-Small Cell Lung Cancer with 6-Weekly Pembrolizumab	<i>tests revised</i>	--	--
LUAVPPMBM	Maintenance Therapy of Advanced Non-Squamous Non-Small Cell Lung Cancer with Pemetrexed and Pembrolizumab	<i>tests revised</i>	--	--
LY Lymphoma				
LYDARCBDF	Treatment of Previously Untreated Light Chain Amyloidosis and Not Eligible for Stem Cell Transplant using Daratumumab, Cyclophosphamide, Bortezomib and Dexamethasone	<i>cautions, tests, premedications, supportive medications, cyclophosphamide dose, steroid dosing table, dose modifications, precautions, and contact updated</i>	<i>prechemo metrics, treatment, tests updated</i>	--
MY Myeloma				
MYBLDF	Treatment of Previously Untreated Multiple Myeloma and Not Eligible for Stem Cell Transplant using Bortezomib, Lenalidomide and Dexamethasone	<i>title, tumour group, eligibility, exclusions, cautions, tests, supportive medications, treatment, steroid dosing table, dose modifications, precautions and contact updated</i>	<i>prechemo metrics, treatment, tests updated</i>	--

REVISED Protocols, PPPOs and Patient Handouts (*revisions in respective columns*)

Code	Protocol Title	Protocol	PPPO	Handout
MYBLDPRE	Treatment of Multiple Myeloma using Lenalidomide, Bortezomib and Dexamethasone as Induction Pre-Stem Cell Transplant	<i>tests, dose modifications updated</i>	<i>prechemo metrics, treatment, tests clarified</i>	--
MYBORMTN	Maintenance Therapy of Multiple Myeloma using Bortezomib for Patients with the High-Risk Chromosome Abnormality	<i>title, tumour group, contact physicians, eligibility, cautions, tests, premedications, supportive medications, dose modifications, precautions, and contact updated</i>	<i>prechemo metrics, treatment, tests updated</i>	--
MYBORPRE	Treatment of Multiple Myeloma using Bortezomib, Dexamethasone With or Without Cyclophosphamide as Induction Pre-Stem Cell Transplant	<i>title, tumour group, eligibility, cautions, tests, premedications, supportive medications, cyclophosphamide dose, steroid dose and steroid table, dose modifications, precautions, and contact updated</i>	<i>prechemo metrics, treatment, tests updated</i>	--
MYBORREL	Treatment of Relapsed Multiple Myeloma using Bortezomib, Dexamethasone With or Without Cyclophosphamide	<i>title, tumour group, contact physicians, eligibility, tests, premedications, supportive medications, cyclophosphamide dose, steroid dosing table, cycle length, dose modifications, precautions, contact updated</i>	<i>prechemo metrics, treatment, RTC, tests updated</i>	--
MYCARDEX	Therapy of Multiple Myeloma using Carfilzomib and Dexamethasone With or Without Cyclophosphamide	<i>title, tumour group, eligibility, exclusions, cautions, tests, supportive medications, hydration, cyclophosphamide dose, hematological dose modifications, vitals monitoring and observation, precautions, and references updated</i>	<i>prechemo metrics, premedications, treatment, observations, hydration, tests updated</i>	--

REVISED Protocols, PPPOs and Patient Handouts (*revisions in respective columns*)

Code	Protocol Title	Protocol	PPPO	Handout
MYCARLD	Therapy of Multiple Myeloma using Carfilzomib, Lenalidomide with Dexamethasone	<i>tumour group, eligibility, exclusions, cautions, tests, supportive medications, hydration, vitals monitoring and observation, dose modifications, precautions, contact, and references updated</i>	<i>format, prechemo metrics, treatment, premedications, tests updated</i>	--
MYDARBD	Treatment of Relapsed and Refractory Multiple Myeloma with Daratumumab in Combination with Bortezomib and Dexamethasone With or Without Cyclophosphamide	<i>eligibility, exclusions, cautions, tests, premedications, supportive medications, steroid dosing table, cyclophosphamide dose, dose modifications, precautions, contact updated</i>	<i>prechemo metrics, treatment, premedications, tests updated</i>	--
MYDARCBDF	Treatment of Previously Untreated Multiple Myeloma and Not Eligible for Stem Cell Transplant using Daratumumab, Cyclophosphamide, Bortezomib and Dexamethasone	<i>eligibility, cautions, tests, premedications, supportive medications, cyclophosphamide dose, steroid dosing table, dose modifications, precautions, contact updated</i>	<i>prechemo metrics, treatment, premedications, tests updated</i>	--
MYDARLD	Treatment of Relapsed and Refractory Multiple Myeloma with Daratumumab in Combination with Lenalidomide and Dexamethasone With or Without Cyclophosphamide	<i>eligibility, exclusions, cautions, tests, premedications, supportive medications, Treatment, steroid dosing table, dose modifications, precautions, and contact updated</i>	<i>prechemo metrics, treatment, premedications, tests updated</i>	--
MYDARLDF	Treatment of Previously Untreated Multiple Myeloma and Not Eligible for Stem Cell Transplant using Daratumumab, Lenalidomide and Dexamethasone	<i>eligibility, tests, premedications, supportive medications, steroid dosing table, dose modifications, precautions, contact updated</i>	<i>format, prechemo metrics, treatment, tests updated</i>	--

REVISED Protocols, PPPOs and Patient Handouts (*revisions in respective columns*)

Code	Protocol Title	Protocol	PPPO	Handout
UMYLDLDF	Treatment of Previously Untreated Multiple Myeloma and Not Eligible for Stem Cell Transplant using Lenalidomide with Low-dose Dexamethasone	<i>tumour group updated, pharmacist contact removed, eligibility, exclusions, cautions, tests, supportive medications, steroid dosing table, dose modifications, precautions, and contact updated</i>	<i>format, prechemo metrics, treatment, tests updated</i>	--
MYLDREL	Therapy of Relapsed Multiple Myeloma using Lenalidomide with Dexamethasone	<i>tumour group, eligibility, exclusions, cautions, tests, supportive medications, steroid dosing table, hematological dose modifications, precautions, contact updated</i>	<i>format changed, prechemo metrics, treatment, tests updated</i>	--
MYLENMTN	Maintenance Therapy of Multiple Myeloma using Lenalidomide	<i>title, tumour group, exclusions, cautions, tests, supportive medications, treatment table, dose modifications, precautions, contact, references updated</i>	<i>format, treatment, tests updated</i>	--
MYMP	Treatment of Multiple Myeloma using Melphalan and Prednisone	<i>title, contact physicians, cautions, tests, supportive medications, dose modifications, precautions, contact updated</i>	<i>format, prechemo metrics, treatment, tests updated</i>	--
MYMPBOR	Treatment of Multiple Myeloma using Melphalan, predniSONE and Weekly Bortezomib With the Option of Substituting Cyclophosphamide for Melphalan	<i>tumour group, contact physicians, eligibility, cautions, tests, premedications, supportive medications, cyclophosphamide dose, steroid dosing table, dose modifications, precautions, and contact updated</i>	<i>prechemo metrics, treatment, tests updated</i>	--

REVISED Protocols, PPPOs and Patient Handouts (*revisions in respective columns*)

Code	Protocol Title	Protocol	PPPO	Handout
UMYPOMDEX	Therapy of Multiple Myeloma using Pomalidomide with Dexamethasone	<i>tumour group and contact physician updated, pharmacist contact removed, eligibility, cautions, tests, supportive medications, steroid dosing table, dose modifications, precautions, and contact updated</i>	<i>format, prechemo metrics, treatment, tests updated</i>	--
UMYISACARD	Therapy of Multiple Myeloma using Carfilzomib, Dexamethasone and Isatuximab with or without Cyclophosphamide	<i>title, cautions, tests, premedications, supportive medications, treatment, dose modification updated</i>	<i>format, prechemo metrics, tests updated</i>	--
UMYISAPOMD	Therapy of Multiple Myeloma using Pomalidomide, Dexamethasone and Isatuximab with or without Cyclophosphamide	<i>title, tests, premedications, supportive medications, treatment updated</i>	<i>format, prechemo metrics, tests updated</i>	--
SC Supportive Care				
SCDRUGRX	Management of Infusion-Related Reactions to Systemic Therapy Agents	--	<i>improve clarity and strengthen the purpose of PPPO-B</i>	--

Resources and Contact Information

Resource	Phone	Email / Toll Free / Fax
Systemic Therapy Update: www.bccancer.bc.ca/health-professionals/clinical-resources/systemic-therapy/systemic-therapy-update		
Systemic Therapy Update Editor	604-877-6000 x 672649	bulletin@bccancer.bc.ca
Oncology Drug Information	604-877-6275	druginfo@bccancer.bc.ca
Cancer Drug Manual Editor	250-519-5500 x 693742	nbadry@bccancer.bc.ca
Pharmacy Oncology Certification	250-712-3900 x 686820	rxchemocert@bccancer.bc.ca
Nurse Educators	604-877-6000 x 672638	nursinged@bccancer.bc.ca
CAP – Compassionate Access Program	604-877-6277	cap_bcca@bccancer.bc.ca fax 604-708-2026
OSCAR – Online System for Cancer Drugs Adjudication and Reimbursement	888-355-0355	oscar@bccancer.bc.ca fax 604-708-2051
Library/Cancer Information	604-675-8003	toll free 888-675-8001 x 8003 requests@bccancer.bc.ca
Library Document Delivery	604-675-8002	requests@bccancer.bc.ca
Pharmacy Professional Practice	604-877-6000 x 672247	mclin@bccancer.bc.ca
Professional Practice, Nursing	604-877-6000 x 672623	BCCancerPPNAdmin@ehcnet.phsa.ca
Provincial Systemic Therapy Program	604-877-6000 x 672247	mclin@bccancer.bc.ca
BC Cancer – Abbotsford	604-851-4710	toll free 877-547-3777
BC Cancer – Kelowna	250-712-3900	toll free 888-563-7773
BC Cancer – Prince George	250-645-7300	toll free 855-775-7300
BC Cancer – Surrey	604-930-2098	toll free 800-523-2885
BC Cancer – Vancouver	604-877-6000	toll free 800-663-3333
BC Cancer – Victoria	250-519-5500	toll free 800-670-3322
Community Oncology Network (CON) sites: To update your contact information, please contact: bulletin@bccancer.bc.ca		

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