

For Health Professionals Who Care for Cancer Patients

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GI GIAVRALOX, UGICABO | **HN** HNLACART3 | **LU** LUAJPP | **LY** LYGVLD

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Editor's Choice

Extended Adjuvant Aromatase Inhibitor for Early Postmenopausal Breast Cancer

Breast

Extended Duration of Adjuvant Aromatase Inhibitor Therapy for Early Breast Cancer in Postmenopausal Women (BRAJANAS, BRAJEXE, BRAJLET) — The BC Cancer Breast Tumour Group is implementing extended adjuvant endocrine therapy with an aromatase inhibitor (AI) (anastrozole, exemestane or letrozole) to a total of 10 years of adjuvant endocrine therapy for postmenopausal women with hormone receptor-positive early breast cancer. Currently, the majority of patients are treated with five years of adjuvant endocrine therapy consisting of either upfront AI for 5 years, or sequenced adjuvant endocrine therapy with tamoxifen and AI for 5 years. The new treatment program will allow patients with high risk of recurrence to continue on an AI for an additional 5 years of therapy, to complete a total of 10 years of adjuvant endocrine therapy. Full eligibility details are outlined in the treatment protocols.

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The extended duration of adjuvant AI therapy is supported by results of the phase III NRG Oncology/NSABP B-42 trial, which randomized patients to five years of letrozole or placebo after they completed the first five years of adjuvant endocrine therapy.^{1,2} Letrozole demonstrated a significant improvement in disease-free survival (DFS) and distant recurrence (DR) after a median follow-up of 9.3 years (DFS 76.1% vs. 72.1%, HR 0.84, 95% CI 0.74-0.96; DR 5.7% vs. 7.5% HR 0.71, 95% CI 0.55-0.93). Long-term toxicities of continued AI therapy include osteoporotic fractures and possible cardiovascular events. In addition, quality of life may be negatively impacted from troublesome daily side effects. Therefore, when considering extending adjuvant endocrine therapy beyond 5 years, it is imperative to consider both the patient's ongoing risk of recurrence and the patient's tolerance of continued AI therapy.

References

1. Mamounas EP, Bandos H, Lembersky BC, et al. Use of letrozole after aromatase inhibitor-based therapy in postmenopausal breast cancer (NRG Oncology/NSABP B-42): a randomised, double-blind, placebo-controlled, phase 3 trial. *Lancet Oncol* 2019;20(1):88-99. [https://doi.org/10.1016/S1470-2045\(18\)30621-1](https://doi.org/10.1016/S1470-2045(18)30621-1)
2. Mamounas EP, Bandos H, Lembersky BC, et al. Ten-year results from NRG Oncology/NSABP B-42: a randomized, double-blinded, placebo-controlled clinical trial of extended adjuvant endocrine therapy with letrozole in postmenopausal women with hormone-receptor positive breast cancer who have completed previous adjuvant therapy with an aromatase inhibitor. San Antonio Breast Cancer Symposium; December 12, 2019.

New Programs

The BC Cancer Provincial Systemic Therapy Program has approved the following new treatment programs effective 01 January 2022. Full details of all treatment programs are available in the [Chemotherapy Protocols](#) section of the BC Cancer website.

Gastrointestinal

Oxaliplatin and Raltitrexed for Metastatic Colorectal Cancer in Patients Intolerant to Fluorouracil or Capecitabine (GIAVRALOX) — The BC Cancer Gastrointestinal Tumour Group is implementing this treatment option for stage IV colorectal cancer patients with documented intolerance to fluorouracil or capecitabine, or with known or suspected dihydropyrimidine dehydrogenase (DPD) deficiency. Treatment is continued until disease progression or unacceptable toxicity.

Cabozantinib for Advanced Hepatocellular Carcinoma (UGICABO) — The BC Cancer Gastrointestinal Tumour Group is introducing cabozantinib for patients with advanced hepatocellular carcinoma whose disease has progressed on sorafenib or lenvatinib. Patients with intolerance to regorafenib are eligible, however patients with disease progression on regorafenib may not receive cabozantinib. BC Cancer Compassionate Access Program (CAP) approval is required.

Head and Neck

Concurrent 3-Weekly Carboplatin and Radiation for Locally Advanced Squamous Cell Carcinoma of the Head and Neck (HNLACART3) — The BC Cancer Head and Neck Tumour Group is implementing a 3-weekly carboplatin chemoradiation option for patients with locally advanced squamous cell carcinoma of the head and neck who are ineligible for cisplatin. Patients who are eligible for cisplatin should be treated accordingly, as the best evidence supports cisplatin as a radiosensitizer. Patients who are unable to tolerate the standard cisplatin chemoradiation options may receive HNLACART3 or HNLACARTW (protocol code revised from HNLACART) as an alternative.

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Lung

Adjuvant Cisplatin and Pemetrexed Following Resection of Non-Small Cell Lung Cancer (LUAJPP) — The BC Cancer Lung Tumour Group is implementing treatment with cisplatin and pemetrexed following resection of non-small cell lung cancer in the adjuvant setting. Treatment should be initiated within 60 days of definitive surgery. If cisplatin is contraindicated or relatively contraindicated, then another treatment protocol should be considered; carboplatin should not be substituted in this treatment protocol.

Lymphoma

Gemcitabine, Vinorelbine and Doxorubicin Pegylated Liposomal for Relapsed or Refractory Hodgkin Lymphoma (LYGVLD) — The BC Cancer Lymphoma and Myeloma Tumour Group is introducing this treatment program for transplant-eligible patients with relapsed or refractory Hodgkin lymphoma. Patients must have adequate renal, hepatic and bone marrow function, and left ventricular ejection fraction (LVEF) $\geq 45\%$ in patients with a lifetime cumulative dose of doxorubicin exceeding 400 mg/m².

Drug Update

Switching to Generic Lenalidomide

Adapted from BC Cancer e-mail communication 17 December 2021

BC Cancer Pharmacy is switching from the current BMS/Celgene lenalidomide (REVLIMID) to the generic Natco Pharma lenalidomide effective 01 January 2022. As existing supplies of BMS/Celgene lenalidomide are depleted, all patients will be switched to Natco lenalidomide.

The RevAid® risk management platform, which is currently in use for BMS/Celgene lenalidomide, will continue to be used for both existing and new patients, irrespective of lenalidomide brand, enabling a seamless transition. No change in workflow is required, except that pharmacists will need to select the correct brand of lenalidomide.

For more information, please see the e-mail communication previously circulated to BC Cancer.

Drug Shortages

The following are updates of drug supply shortages in BC. Full details about new, updated or resolved drug shortages, including recommended treatment alternatives, are found in the *Briefing Notes* and e-mail communications previously circulated to BC Cancer and the Community Oncology Network (CON).

Updated

Paclitaxel NAB (ABRAXANE)

Adapted from BC Cancer e-mail communication 30 December 2021

In September, BC Cancer Pharmacy was advised of a paclitaxel NAB (ABRAXANE) shortage due to a global manufacturing issue, and a 60% purchase allocation was implemented. Although the manufacturer initially reported a supply return date of 31 December 2021, this has been updated to an unknown return date. A continuation of the 60% allocation is advised for the month of January, with further clarification anticipated in early January 2022.

Health Canada-approved paclitaxel NAB has been imported from the United Arab Emirates (UAE) and from Germany. Supplies at BC Cancer centre pharmacies are very limited, but sufficient to cover existing patients for their next month of treatment. Prior to initiating a new patient on treatment, please contact your regional cancer pharmacy to determine if sufficient supplies are available.

Cancer Drug Manual[®]

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

New Documents

The **Treosulfan Interim Monograph** has been completely revised. Expert review was provided by Dr. Tom Nevill (hematologist) and Katie Lalaria (clinical pharmacist) of the Leukemia/BMT Program of BC, and Dr. Jacob Rozmus (pediatric hematologist/oncologist) and Dr. Jennifer Kendrick (clinical pharmacy specialist) of BC Children's Hospital. The following sections have been added or expanded: *Pharmacokinetics*, *Special Precautions*, *Interactions* and *Dosage Guidelines*. Treosulfan is an alkylating agent related to busulfan. It is used as a conditioning agent for stem cell transplant, particularly in patients with an increased risk of hepatic sinusoidal obstruction syndrome. The usual dose is 10-14 g/m² IV daily for three consecutive days prior to stem cell transplantation.

Highlights from this document include:

- treosulfan is now marketed in Canada
- myelosuppression is expected and is the desired therapeutic effect of the conditioning regimen
- extravasation hazard has been revised to 'irritant'; no specific antidote is available for extravasation
- drug interaction potential is expected to be low

Note that the following drug is not a BC Cancer Benefit Drug and requires application to the BC Cancer Compassionate Access Program (CAP). The corresponding Interim Monograph, Patient Handout and Chemotherapy Preparation and Stability Chart entry are made available for reference only.

The **Polatuzumab Vedotin Interim Monograph** has been completely revised and a **Patient Handout** has been developed. Expert review was provided by Dr. Laurie Sehn (medical oncologist) and Louisa Pang (clinical pharmacist) of the BC Cancer Lymphoma and Myeloma Tumour Group. The following sections have been added or expanded: *Pharmacokinetics*, *Special Precautions* and *Dosage Guidelines*. Polatuzumab vedotin is a CD79b-directed antibody-drug conjugate used in the treatment of diffuse large B-cell lymphoma. The usual dose is 1.8 mg/kg IV every three weeks.

Highlights from these documents include:

- serious infections, including opportunistic infections, have been reported
- severe myelosuppression may occur
- premedication for infusion-related reactions is required prior to each treatment; reactions have occurred as late as 24 hours after administration

Revised Documents

Amivantamab Monograph and Chemotherapy Preparation and Stability Chart

Synonym: added synonym JNJ-61186372

Supply and Storage: added synonym as cross-reference to drug name

Melphalan Monograph

Side Effects table: updated emetogenic potential

Pembrolizumab Monograph

Dosage Guidelines: updated citations to include new Head and Neck protocols and updated Lung protocols

Pertuzumab Monograph

Dosage Guidelines: added extended interval dosing and new Breast protocols

Polatuzumab Vedotin Chemotherapy Preparation and Stability Chart

added new vial size and updated stability

Trastuzumab Monograph

Dosage Guidelines: added extended interval dosing and new Breast protocols

Retired Documents

The **Interferon Alfa-2b Monograph** and **Patient Handouts** [Injection, Injection (Chinese), Injection (Punjabi), and Intravesical] have been retired. Interferon Alfa-2b has been deleted from the **Cancer Drug Manual Drug Index**, **Chemotherapy Preparation and Stability Chart** and **Extravasation Hazard List**.

CDM Editorial Review Board Acknowledgements

The Cancer Drug Manual[®] Editor, Nadine Badry (BC Cancer – Victoria), and CDM Writer, Alysha Bharmal (BC Cancer – Surrey), would like to acknowledge the contributions of the CDM Editorial Review Board and expert reviewers for the year 2021. Thank you for your ongoing support of the CDM and for generously sharing your time and expertise throughout the year!

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Benefit Drug List

New Programs

The following new treatment programs have been added to the BC Cancer [Benefit Drug List](#) effective 01 January 2022:

Protocol Title	Protocol Code	Benefit Status
Palliative Therapy of Metastatic Colorectal Cancer using Oxaliplatin and Raltitrexed in Patients Intolerant to Fluorouracil or Capecitabine	GIAVRALOX	Class I
Treatment of Advanced Hepatocellular Carcinoma using Cabozantinib	UGICABO	Restricted
Treatment of Locally Advanced Squamous Cell Carcinoma of the Head and Neck with Concurrent 3-Weekly Carboplatin and Radiation	HNLACART3	Class I
Adjuvant Cisplatin and Pemetrexed Following Resection of Non-Small Cell Lung Cancer	LUAJPP	Class I
Treatment of Relapsed or Refractory Hodgkin Lymphoma with Gemcitabine, Vinorelbine and Doxorubicin Pegylated Liposomal	LYGVLD	Class I

Revised Programs

The following treatment programs have been revised on the BC Cancer [Benefit Drug List](#) effective 01 January 2022:

Protocol Title	Protocol Code	Benefit Status
Palliative Therapy for Metastatic Breast Cancer using Trastuzumab Emtansine (KADCYLA)	BRAVKAD	Class I <i>(previously Restricted)</i>
Metastatic Colorectal Cancer using Irinotecan, Fluorouracil, Leucovorin and Panitumumab	GIFFIRPAN	Class I <i>(previously Restricted)</i>
Metastatic Colorectal Cancer using Oxaliplatin, Fluorouracil, Leucovorin and Panitumumab	GIFFOXPAN	Class I <i>(previously Restricted)</i>
Third- or Later-Line Therapy of Advanced Gastroesophageal Carcinoma using Trifluridine-Tipiracil	GIGAVTRFT	Class I <i>(previously Restricted)</i>
First-Line Therapy of Advanced Hepatocellular Carcinoma using Lenvatinib	GILEN	Class I <i>(previously Restricted)</i>
Management of Non-Functional Neuroendocrine Tumours of the GI Tract using Octreotide (SANDOSTATIN LAR)	GINFOCLAR	Class I <i>(previously Restricted)</i>
Symptomatic Management of Functional Carcinoid and Neuroendocrine Tumours of the GI Tract using Octreotide	GIOCTLAR	Class I <i>(previously Restricted)</i>

Revised Programs *continued*

Protocol Title	Protocol Code	Benefit Status
Advanced Hepatocellular Carcinoma using Sorafenib	GISORAF	Class I <i>(previously Restricted)</i>
Treatment of Locally Advanced or Metastatic Urothelial Carcinoma using Pembrolizumab	GUAVPEM	Class I <i>(previously Restricted)</i>
Treatment of Locally Advanced or Metastatic Urothelial Carcinoma using 6-Weekly Pembrolizumab	GUAVPEM6	Class I <i>(previously Restricted)</i>
Treatment of ALK-Positive Advanced Non-Small Cell Lung Cancer (NSCLC) with Ceritinib	LUAVCER	Class I <i>(previously Restricted)</i>
Treatment of EGFR T790M Mutation-Positive Advanced Non-Small Cell Lung Cancer (NSCLC) with Osimertinib	LUAVOSI	Class I <i>(previously Restricted)</i>
First-Line Treatment of Epidermal Growth Factor Receptor (EGFR) Mutation-Positive Advanced Non-Small Cell Lung Cancer (NSCLC) with Osimertinib	LUAVOSIF	Class I <i>(previously Restricted)</i>
First-Line Treatment of Advanced Squamous Non-Small Cell Lung Cancer with Paclitaxel, Carboplatin and Pembrolizumab	LUAVPCMB	Class I <i>(previously Restricted)</i>
First-Line Treatment of Advanced Squamous Non-Small Cell Lung Cancer with Platinum, Gemcitabine and Pembrolizumab	LUAVPGPMB	Class I <i>(previously Restricted)</i>
First-Line Treatment of Advanced Non-Squamous Non-Small Cell Lung Cancer with Platinum, Pemetrexed and Pembrolizumab	LUAVPPMB	Class I <i>(previously Restricted)</i>
Adjuvant Treatment of Stage III and IV, BRAF-Mutated, Fully Resected Melanoma using Dabrafenib and Trametinib	SMAJDT	Class I <i>(previously Restricted)</i>
Adjuvant Treatment of Resected Stage III-IV NED Melanoma using Nivolumab	SMAJNIV	Class I <i>(previously Restricted)</i>
Adjuvant Treatment of Resected Stage III-IV NED Melanoma using 4-Weekly Nivolumab	SMAJNIV4	Class I <i>(previously Restricted)</i>
Adjuvant Treatment of Resected Stage III-IV NED Melanoma using Pembrolizumab	SMAJPEM	Class I <i>(previously Restricted)</i>
Adjuvant Treatment of Resected Stage III-IV NED Melanoma using 6-Weekly Pembrolizumab	SMAJPEM6	Class I <i>(previously Restricted)</i>
Locally Advanced or Metastatic Cutaneous Squamous Cell Carcinoma using Cemiplimab	SMAVCEM	Class I <i>(previously Restricted)</i>
Unresectable or Metastatic Melanoma using Ipilimumab and Nivolumab	SMAVIPNI	Class I <i>(previously Restricted)</i>
Metastatic or Locally Advanced Basal Cell Carcinoma using Vismodegib	SMAVVIS	Class I <i>(previously Restricted)</i>

Deleted Programs

The following treatment programs have been deleted from the BC Cancer [Benefit Drug List](#) effective 01 January 2022:

Protocol Title	Protocol Code	Benefit Status
Palliative Therapy for BCG-Refractory Superficial High-Grade Transitional Cell Carcinoma Bladder with BCG and Interferon	GUBCGIFN	Deleted <i>Alternate protocols: GUBGEM, GUBGEMDOC, GUBMITO</i>
Topical Therapy for Ocular Malignancies using Interferon Alfa-2b Eye Drops	OCIFN	Deleted <i>Alternate protocols: OCFU, OCMITO</i>

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

Protocol Code	Protocol Title	Protocol	PPPO	Handout
GI AVRALOX	Palliative Therapy of Metastatic Colorectal Cancer using Oxaliplatin and Raltitrexed in Patients Intolerant to Fluorouracil or Capecitabine	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
UGICABO	Treatment of Advanced Hepatocellular Carcinoma using Cabozantinib	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
HNLACART3	Treatment of Locally Advanced Squamous Cell Carcinoma of the Head and Neck with Concurrent 3-Weekly Carboplatin and Radiation	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
LU AJPP	Adjuvant Cisplatin and Pemetrexed Following Resection of Non-Small Cell Lung Cancer	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
LYGVLD	Treatment of Relapsed or Refractory Hodgkin Lymphoma with Gemcitabine, Vinorelbine and Doxorubicin Pegylated Liposomal	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Highlights of New & Revised Protocols, PPPOs 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 (CAP) approval are prefixed with the letter **U**.

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

Protocol Code	Protocol Title	Protocol	PPPO	Handout
BR Breast				
BRAJANAS	Neoadjuvant or Adjuvant Therapy for Breast Cancer using Anastrozole in Postmenopausal Women	<i>Contact Physician, Eligibility, Tests, Treatment and Precautions revised</i>	----	----
BRAJEXE	Neoadjuvant or Adjuvant Therapy for Breast Cancer using Exemestane in Postmenopausal Women	<i>Contact Physician, Eligibility, Tests, Treatment and Precautions revised</i>	----	----
BRAJLET	Neoadjuvant or Adjuvant Therapy for Breast Cancer using Letrozole in Postmenopausal Women	<i>Contact Physician, Eligibility, Tests, Treatment and Precautions revised</i>	----	----
UBRAVKAD	Palliative Therapy for Metastatic Breast Cancer using Trastuzumab Emtansine (KADCYLA)	<i>Protocol Code revised (U removed); Eligibility revised (CAP requirement removed); Exclusions revised</i>	<i>Protocol Code revised; CAP requirement removed</i>	----
GI Gastrointestinal				
GIA	Palliative Therapy for Hepatoma using Doxorubicin	<i>Dose Modifications clarified</i>	<i>Institution name updated</i>	<i>Institution name, side effects and management updated</i>
GIAAVCT	First-Line Palliative Treatment of Metastatic Anal Squamous Cell Carcinoma using Carboplatin and Weekly Paclitaxel	<i>GI ST Chair name and contact information updated; Treatment updated (until disease progression or unacceptable toxicity)</i>	----	----
GIAVDOC	Palliative Treatment of Metastatic Esophagogastric Adenocarcinoma with Docetaxel	<i>GI ST Chair name and contact information updated; Treatment updated (until disease progression or unacceptable toxicity)</i>	----	----
GIAVFL	Palliative Combination Chemotherapy for Metastatic Colorectal Cancer using Fluorouracil Injection and Infusion and Leucovorin Infusion	<i>Treatment updated (until disease progression or unacceptable toxicity)</i>	----	----
GIAVTZCAP	Palliative Therapy of Metastatic Neuroendocrine Cancer using Temozolomide and Capecitabine	<i>Treatment updated (until disease progression or unacceptable toxicity)</i>	----	----

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

Protocol Code	Protocol Title	Protocol	PPO	Handout
GI Gastrointestinal (continued)				
GICAPIRI	Palliative Combination Chemotherapy for Metastatic Colorectal Cancer using Irinotecan and Capecitabine in Patients Unsuitable for GIFOLFIRI	<i>Treatment updated (until disease progression or unacceptable toxicity)</i>	----	----
GICAPOX	Palliative Combination Chemotherapy for Metastatic Colorectal Cancer using Oxaliplatin and Capecitabine	<i>Treatment updated (until disease progression or unacceptable toxicity)</i>	----	----
GICART	Curative Combined Modality Therapy for Carcinoma of the Anal Canal using Mitomycin, Capecitabine and Radiation Therapy	<i>Exclusion updated ('known HIV positive' changed to 'uncontrolled HIV infection')</i>	----	<i>Institution name, side effects and management updated</i>
GICPART	Curative Combined Modality Therapy for Carcinoma of the Anal Canal using Cisplatin, Capecitabine and Radiation Therapy	----	----	<i>Institution name, side effects and management updated</i>
ⓈGIFIRPAN	Metastatic Colorectal Cancer using Irinotecan, Fluorouracil, Leucovorin and Panitumumab	<i>Protocol Code revised (U removed); Eligibility revised (CAP requirement removed); Treatment updated (until disease progression or unacceptable toxicity)</i>	<i>Protocol Code revised; CAP requirement removed</i>	<i>Protocol code revised</i>
ⓈGIFFOXPAN	Metastatic Colorectal Cancer using Oxaliplatin, Fluorouracil, Leucovorin and Panitumumab	<i>Protocol Code revised (U removed); Eligibility revised (CAP requirement removed); Treatment updated (until disease progression or unacceptable toxicity)</i>	<i>Protocol Code revised; CAP requirement removed</i>	<i>Protocol code revised</i>
GIFOLFOX	Palliative Combination Chemotherapy for Metastatic Colorectal Cancer using Oxaliplatin, Fluorouracil and Leucovorin	<i>Treatment updated (until disease progression or unacceptable toxicity)</i>	----	----
GIFUC	Palliative Chemotherapy for Upper Gastrointestinal Tract Cancer (Gastric, Esophageal, Gall Bladder, Pancreas Carcinoma and Cholangiocarcinoma) and Metastatic Anal using Infusional Fluorouracil and Cisplatin	<i>GI ST Chair name and contact information updated; Treatment updated (until disease progression or unacceptable toxicity)</i>	----	----
GIGAVCC	Palliative Therapy of Metastatic or Locally Advanced Anal Squamous Cell Carcinoma using Cisplatin and Capecitabine	<i>Treatment updated (until disease progression or unacceptable toxicity)</i>	----	----
GIGAVCOX	Palliative Treatment of Metastatic or Locally Advanced Gastric, Gastroesophageal Junction or Esophageal Adenocarcinoma using Capecitabine and Oxaliplatin	<i>Treatment updated (until disease progression or unacceptable toxicity)</i>	----	----

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

Protocol Code	Protocol Title	Protocol	PPO	Handout
GI Gastrointestinal <i>(continued)</i>				
GIGAVFFOX	Palliative Treatment of Metastatic or Locally Advanced Gastric, Gastroesophageal Junction or Esophageal Adenocarcinoma using Oxaliplatin, Fluorouracil and Leucovorin	<i>Treatment updated (until disease progression or unacceptable toxicity)</i>	-----	-----
GIGAVTR	Continuation of Palliative Treatment of Metastatic or Inoperable, Locally Advanced Gastric or Gastroesophageal Junction Adenocarcinoma using Trastuzumab	<i>Dose Modifications updated (loading dose clarified)</i>	-----	-----
⚡GIGAVTRFT	Third- or Later-Line Therapy of Advanced Gastroesophageal Carcinoma using Trifluridine-Tipiracil	<i>Protocol Code revised (U removed); Eligibility revised (CAP requirement removed); GI ST Chair name and contact information updated</i>	<i>Protocol Code revised; CAP requirement removed</i>	<i>Protocol code revised</i>
GIGFOLFIRI	Second-Line Palliative Combination Chemotherapy for Metastatic Gastric or Esophageal Adenocarcinoma using Irinotecan, Fluorouracil and Leucovorin	<i>Treatment updated (until disease progression or unacceptable toxicity)</i>	-----	-----
GIIR	Palliative Chemotherapy of Metastatic Colorectal Cancer using Irinotecan	<i>GI ST Chair name and contact information updated</i>	-----	-----
⚡GILEN	First-Line Therapy of Advanced Hepatocellular Carcinoma using Lenvatinib	<i>Protocol Code revised (U removed); Eligibility revised (CAP requirement removed); GI ST Chair name and contact information updated</i>	<i>Protocol Code revised; CAP requirement removed</i>	<i>Protocol code revised</i>
⚡GINFOCLAR	Management of Non-Functional Neuroendocrine Tumours of the GI Tract using Octreotide (SANDOSTATIN LAR)	<i>Protocol Code revised (U removed); Eligibility revised (CAP requirement removed); GI ST Chair name and contact information updated</i>	<i>Protocol Code revised; CAP requirement removed</i>	<i>Protocol code revised</i>
⚡GIOCTLAR	Symptomatic Management of Functional Carcinoid and Neuroendocrine Tumours of the GI Tract using Octreotide	<i>Protocol Code revised (U removed); Eligibility revised (CAP requirement removed); GI ST Chair name and contact information updated</i>	<i>BC Cancer logo revised; Protocol Code revised; CAP requirement removed; nomenclature updated</i>	<i>Protocol code revised</i>
GIPAJGEM	Adjuvant Chemotherapy for Pancreatic Adenocarcinoma using Gemcitabine	-----	-----	<i>Institution name, side effects and management updated</i>
GIPAVCAP	Second-Line Treatment of Metastatic or Unresectable Pancreatic Adenocarcinoma using Capecitabine	<i>Treatment updated (until disease progression or unacceptable toxicity)</i>	-----	-----

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

Protocol Code	Protocol Title	Protocol	PPPO	Handout
GI Gastrointestinal <i>(continued)</i>				
GIPE	Palliative Therapy of Neuroendocrine Tumours using Cisplatin and Etoposide	<i>Treatment updated (until disease progression or unacceptable toxicity)</i>	----	----
GIPNEVER	Palliative Treatment of Advanced Pancreatic Neuroendocrine Tumours using Everolimus	<i>GI ST Chair name and contact information updated; Treatment updated (until disease progression or unacceptable toxicity)</i>	----	----
UGIPRRT	Peptide Receptor Radionuclide Therapy (PRRT) using Lutetium ¹⁷⁷ Lu-Dotatate (LUTATHERA) for Treatment in Patients with Somatostatin Receptor-Positive Midgut Neuroendocrine Tumours	<i>Protocol title clarified</i>	----	----
GIRALT	Palliative Chemotherapy for Metastatic Colorectal Cancer using Raltitrexed in Patients with Previous Fluorouracil Toxicity	<i>Treatment updated (until disease progression or unacceptable toxicity)</i>	----	----
UGISORAF	Advanced Hepatocellular Carcinoma using Sorafenib	<i>Protocol Code revised (U removed); Eligibility revised (CAP requirement removed); GI ST Chair name and contact information updated; protocol activation and revision dates moved to footer</i>	<i>Protocol Code revised; CAP requirement removed</i>	<i>Protocol code revised</i>
GO Gynecologic				
GOOVLDOX	Treatment of Epithelial Ovarian Cancer Relapsing After Primary Treatment using Doxorubicin Pegylated Liposomal	----	----	<i>CDM link updated</i>
GU Genitourinary				
UGUAVPEM	Treatment of Locally Advanced or Metastatic Urothelial Carcinoma using Pembrolizumab	<i>Protocol Code revised (U removed); Eligibility revised (CAP requirement removed)</i>	<i>Protocol Code revised; CAP requirement removed</i>	<i>Protocol code revised</i>
UGUAVPEM6	Treatment of Locally Advanced or Metastatic Urothelial Carcinoma using 6-Weekly Pembrolizumab	<i>Protocol Code revised (U removed); Eligibility revised (CAP requirement removed)</i>	<i>Protocol Code revised; CAP requirement removed</i>	<i>Protocol code revised</i>
HN Head and Neck				
HNLACARTW	Treatment of Locally Advanced Squamous Cell Carcinoma of the Head and Neck with Concurrent Weekly Carboplatin and Radiation	<i>Protocol title, Protocol Code and References revised</i>	<i>Protocol Code revised</i>	<i>Protocol code and title revised</i>

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

Protocol Code	Protocol Title	Protocol	PPPO	Handout
LU Lung				
⚡LUAVCER	Treatment of ALK-Positive Advanced Non-Small Cell Lung Cancer (NSCLC) with Ceritinib	<i>Protocol Code revised (U removed); Eligibility revised (CAP requirement removed)</i>	<i>Protocol Code revised; CAP requirement removed</i>	<i>Protocol code revised</i>
⚡LUAVOSI	Treatment of EGFR T790M Mutation-Positive Advanced Non-Small Cell Lung Cancer (NSCLC) with Osimertinib	<i>Protocol Code revised (U removed); Eligibility revised (CAP requirement removed)</i>	<i>Protocol Code revised; CAP requirement removed</i>	<i>Protocol code revised</i>
⚡LUAVOSIF	First-Line Treatment of Epidermal Growth Factor Receptor (EGFR) Mutation-Positive Advanced Non-Small Cell Lung Cancer (NSCLC) with Osimertinib	<i>Protocol Code revised (U removed); Eligibility revised (CAP requirement removed)</i>	<i>Protocol Code revised; CAP requirement removed</i>	<i>Protocol code revised</i>
⚡LUAVPCMB	First-Line Treatment of Advanced Squamous Non-Small Cell Lung Cancer with Paclitaxel, Carboplatin and Pembrolizumab	<i>Protocol Code revised (U removed); Eligibility revised (CAP requirement removed); Exclusions revised</i>	<i>Protocol Code revised; CAP requirement removed</i>	<i>Protocol code revised</i>
⚡LUAVPGMB	First-Line Treatment of Advanced Squamous Non-Small Cell Lung Cancer with Platinum, Gemcitabine and Pembrolizumab	<i>Protocol Code revised (U removed); Eligibility revised (CAP requirement removed); Exclusions revised</i>	<i>Protocol Code revised; CAP requirement removed</i>	<i>Protocol code revised</i>
LUAVPP	First-Line Treatment of Advanced Non-Small Cell Lung Cancer with Platinum and Pemetrexed	<i>Exclusions and Premedications revised</i>	<i>Premedications revised</i>	<i>Pretreatment medications revised</i>
⚡LUAVPPMB	First-Line Treatment of Advanced Non-Squamous Non-Small Cell Lung Cancer with Platinum, Pemetrexed and Pembrolizumab	<i>Protocol Code revised (U removed); Eligibility revised (CAP requirement removed); Exclusions revised; Premedications revised</i>	<i>Protocol Code revised; CAP requirement removed; Premedications revised</i>	<i>Protocol code revised, pretreatment medications revised</i>
LUMMPP	Treatment of Malignant Mesothelioma with Platinum and Pemetrexed	<i>Premedications revised</i>	<i>Premedications revised</i>	<i>Pretreatment medications revised</i>
LY Lymphoma				
LYEPOCHR	Treatment of Lymphoma with Dose-Adjusted Etoposide, Doxorubicin, Vincristine, Cyclophosphamide, Prednisone and Rituximab with Intrathecal Methotrexate	<i>Bloodwork timing clarified (for IT methotrexate)</i>	----	----
LYRMTN	Maintenance Rituximab for Indolent Lymphoma	<i>Treatment clarified</i>	----	----
LYVIPDRT	Treatment of Newly Diagnosed Nasal, Extranodal Natural Killer (NK) or T-Cell lymphoma, using Concurrent Radiation and Weekly Cisplatin Followed by Etoposide, Ifosfamide, Cisplatin and Dexamethasone	<i>Eligibility and treatment interval clarified</i>	<i>Premedications and Return Appointment Orders revised; hypersensitivity banner added</i>	----

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

Protocol Code	Protocol Title	Protocol	PPPO	Handout
MY Myeloma				
MYMP	Treatment of Multiple Myeloma using Melphalan and Prednisone	<i>Eligibility and References revised</i>	----	----
SA Sarcoma				
KSLDO	Therapy of Kaposi Sarcoma using Doxorubicin Pegylated Liposomal	----	<i>Prechemotherapy metrics updated; Premedications added</i>	----
SM Skin and Melanoma				
⚡SMAJDT	Adjuvant Treatment of Stage III and IV, BRAF-Mutated, Fully Resected Melanoma using Dabrafenib and Trametinib	<i>Protocol Code revised (U removed); Eligibility revised (CAP requirement removed); Exclusions revised</i>	<i>Protocol Code revised; CAP requirement removed</i>	<i>Protocol code revised</i>
⚡SMAJNIV	Adjuvant Treatment of Resected Stage III-IV NED Melanoma using Nivolumab	<i>Protocol Code revised (U removed); Eligibility revised (CAP requirement removed); Exclusions revised</i>	<i>Protocol Code revised; CAP requirement removed</i>	<i>Protocol code revised</i>
⚡SMAJNIV4	Adjuvant Treatment of Resected Stage III-IV NED Melanoma using 4-Weekly Nivolumab	<i>Protocol Code revised (U removed); Eligibility revised (CAP requirement removed); Exclusions revised</i>	<i>Protocol Code revised; CAP requirement removed</i>	<i>Protocol code revised</i>
⚡SMAJPEM	Adjuvant Treatment of Resected Stage III-IV NED Melanoma using Pembrolizumab	<i>Protocol Code revised (U removed); Eligibility revised (CAP requirement removed); Exclusions revised</i>	<i>Protocol Code revised; CAP requirement removed</i>	<i>Protocol code revised</i>
⚡SMAJPEM6	Adjuvant Treatment of Resected Stage III-IV NED Melanoma using 6-Weekly Pembrolizumab	<i>Protocol Code revised (U removed); Eligibility revised (CAP requirement removed); Exclusions revised</i>	<i>Protocol Code revised; CAP requirement removed</i>	<i>Protocol code revised</i>
⚡SMAVCEM	Locally Advanced or Metastatic Cutaneous Squamous Cell Carcinoma using Cemiplimab	<i>Protocol Code revised (U removed); Eligibility revised (CAP requirement removed); Exclusions revised; Tests revised</i>	<i>Protocol Code revised; CAP requirement removed</i>	<i>Protocol code revised</i>
SMAVDAB	Treatment of BRAF V600 Mutation-Positive Unresectable or Metastatic Melanoma using Dabrafenib	<i>Eligibility and Exclusions revised</i>	----	----
SMAVDT	Treatment of BRAF V600 Mutation-Positive Unresectable or Metastatic Melanoma using Dabrafenib and Trametinib	<i>Eligibility and Exclusions revised</i>	----	----
SMAVFIPI	First-Line Treatment of Unresectable or Metastatic Melanoma using Ipilimumab	<i>Exclusions clarified</i>	----	----

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

Protocol Code	Protocol Title	Protocol	PPPO	Handout
SM Skin and Melanoma (continued)				
SMAVIPI	Treatment of Unresectable or Metastatic Melanoma using Ipilimumab	<i>Eligibility and Exclusions clarified</i>	----	----
⚡SMAVIPNI	Unresectable or Metastatic Melanoma using Ipilimumab and Nivolumab	<i>Protocol Code revised (U removed); Eligibility revised (CAP requirement removed); Exclusions revised</i>	<i>Protocol Code revised; CAP requirement removed</i> Induction and Maintenance PPPOs	<i>Protocol code revised</i>
SMAVNIV	Treatment of Unresectable or Metastatic Melanoma using Nivolumab	<i>Exclusions clarified; Tests revised</i>	----	----
SMAVNIV4	Treatment of Unresectable or Metastatic Melanoma using 4-Weekly Nivolumab	<i>Eligibility, Exclusions and Tests revised</i>	----	----
SMAVPEM	Treatment of Unresectable or Metastatic Melanoma using Pembrolizumab	<i>Eligibility, Exclusions and Tests revised</i>	----	----
SMAVPEM6	Treatment of Unresectable or Metastatic Melanoma using 6-Weekly Pembrolizumab	<i>Eligibility, Exclusions and Tests revised</i>	----	----
SMAVTMZ	Palliative Therapy for Malignant Melanoma with Brain Metastases using Temozolomide	<i>Eligibility and Exclusions revised</i>	----	----
SMAVTRA	Treatment of BRAF V600 Mutation-Positive Unresectable or Metastatic Melanoma using Trametinib	<i>Eligibility and Exclusions revised</i>	----	----
SMAVVC	Treatment of BRAF V600 Mutation-Positive Unresectable or Metastatic Melanoma using Vemurafenib and Cobimetinib	<i>Eligibility and Exclusions revised</i>	----	----
SMAVVEM	Treatment of BRAF V600 Mutation-Positive Unresectable or Metastatic Melanoma using Vemurafenib	<i>Eligibility and Exclusions revised</i>	----	----
⚡SMAVVIS	Metastatic or Locally Advanced Basal Cell Carcinoma using Vismodegib	<i>Protocol Code revised (U removed); Eligibility revised (CAP requirement removed); Exclusions revised</i>	<i>Protocol Code revised; CAP requirement removed</i>	----
SMDTIC	Palliative Therapy for Metastatic Malignant Melanoma using High-Dose Dacarbazine (DTIC)	<i>Eligibility and Exclusions revised</i>	----	----
SMIMI	Topical Immunotherapy for In-Transit Melanoma Metastases, Cutaneous Lymphoma, Basal Cell Carcinoma using Imiquimod	<i>Eligibility revised</i>	----	----

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

Protocol Code	Protocol Title	Protocol	PPO	Handout
SM Skin and Melanoma (<i>continued</i>)				
SMMCCAIVE	Second-Line Treatment of Recurrent or Metastatic Merkel Cell Carcinoma using Avelumab	<i>Eligibility and Exclusions revised</i>	----	----
SMMCCPE	Treatment of Recurrent or Metastatic Merkel Cell Carcinoma (MCC) with Cisplatin and Etoposide	<i>Eligibility and Exclusions revised</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
Manufacturer Patient Assistance Programs: http://www.bccancer.bc.ca/mpap		
Library/Cancer Information	604-675-8003	requests@bccancer.bc.ca toll free 888-675-8001 x 8003
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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