Systemic Therapy Education Bulletin

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

Provincial Systemic Therapy Drug Programs Under Consideration

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

HNLACART

Treatment Programs	Indication (Refer to protocol for more details)	Associated Adverse Events
Carboplatin	Carboplatin and concurrent radiotherapy for patients with **Locally Advanced Squamous Cell Carcinoma of the Head and Neck**	Possible adverse events: • Myelosuppression • Infusion-related reactions • Nausea and vomiting • Fatigue • Neurotoxicity • Nephrotoxicity • Mucositis – radiation side effects • Dry mouth – radiation side effects • Loss of taste – radiation side effects • Painful swallowing – radiation side effects

Dosing and Administration Information

Pre-medications:

- **Antiemetic:** moderate emetogenicity (see SCNAUSEA)

Dosing and Schedule: weekly for 7 weeks concurrent with radiation therapy

- **IV carboplatin** AUC 2 administer over 30 minutes
- **Radiation:** 70 Gy external beam thoracic radiotherapy in 35 fractions over 7 weeks

Additional Protocol Information:

- Prior to initiation of treatment, patients to be referred for consultation to Dentistry and Nutrition Services
- Placement of a feeding gastrostomy tube prior to treatment is encouraged if there has been significant weight loss (i.e., greater than 10% from baseline)

LYCHPBV

Treatment Programs	Indication: Under Review (Refer to protocol for more details)	Associated Adverse Events
Cyclophosphamide Plus Doxorubicin Plus Prednisone Plus Brentuximab vedotin	Treatment of patients with **Peripheral T-Cell Lymphoma (PTCL)**	Possible adverse events (of any grade): • Myelosuppression • Nausea and vomiting • Diarrhea • Hepatotoxicity • Acute pancreatitis • Cardiotoxicity • Alopecia • Insomnia Brentuximab vedotin-specific adverse events: • Infusion-related reaction • Tumor lysis syndrome • Progressive multifocal leukoencephalopathy (PML) • Stevens-Johnson syndrome • Peripheral sensory neuropathy

Dosing and Administration Information

Pre-medications:

- **Antiemetic:** high emetogenicity (see SCNAUSEA)

Dosing and Schedule: every 21 days for 6 cycles

- **IV cyclophosphamide** 750 mg/m^2 administer over 20 – 60 minutes
  PLUS
- **IV doxorubicin** 50 mg/m^2 IV push
  PLUS
- **Oral prednisone** 45 mg/m^2 in the morning with food on days 1 – 5
  PLUS
- **IV Brentuximab vedotin** 1.8 mg/kg administer over 30 minutes
  - The dose for patients weighing greater than 100 kg should be calculated based on a weight of 100 kg

Additional Protocol Information:

- Filgrastim is mandatory for primary prevention of neutropenia.
  - **SC filgrastim** 5 mcg/kg daily x 5 days starting on day 7
    - 300 mcg: up to 75 kg
    - 480 mcg: 76 kg to 110 kg
    - 600 mcg: greater than 110 kg
- Patients with rapidly proliferating tumour and high tumour burden are at risk of tumour lysis syndrome from brentuximab vedotin and should be monitored closely.

Website Resources and Contact Information

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