

# Systemic Therapy Update



BC Cancer Agency

CARE + RESEARCH

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For health professionals who care for cancer patients  
Available online at [www.bccancer.bc.ca/HPI/ChemotherapyProtocols/stupdate](http://www.bccancer.bc.ca/HPI/ChemotherapyProtocols/stupdate)

## INSIDE THIS ISSUE

- **Editor's Choice – [Highlights of Changes in Protocols and PPPOs](#):** Aprepitant Dosing Time, Gastrointestinal Tumour Group Protocols; [Drug Update](#) – CARBOplatin Shortage; [BCCA Compassionate Access Program Update](#)
- [Communities Oncology Network](#) – Pharmacy Resources on BCCA Website
- [List of New and Revised Protocols, Pre-Printed Orders and Patient Handouts](#) – **New:** GICPART, GIFUART, GIFUPART, UGIGAVCCT, UGIGAVCFT, GIGAVTR, UMYMPT. **Revised:** UCNBEV, UGIAVPANI, UGUTIP, LUAVERL, LUAVPEM, ULUAVPMTN, ULUAVPP, LUMMPG, LUMMPP, LYABVD, LYCVPPABO, UMYMPT, MYPAM. **Aprepitant Protocols:** GOBEP, GOEP, GOVCIS, GOSMCCRT, UGUAJPG, GUEP, GUNAJPG, UGUTIP, HNAVFP, HNAVPE, HNAVFP, HNAVPG, HNNLAPG, HNSAVFP.
- [Website Resources and Contact Information](#)

## EDITOR'S CHOICE

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

**Aprepitant Dosing Time with Multiple Day Chemotherapy Regimens** has been standardized in the protocols and PPPOs. Aprepitant is to be given as 125 mg pre-chemotherapy on Day 1 and 80 mg PO once daily in the morning on Days 2 and 3. This is similar to the dosing regimen for single-day chemotherapy because no specific recommendations are available for multiple-day chemotherapy.

The **Gastrointestinal (GI) Tumour Group** has introduced several changes:

- **Six new protocol-specific patient information handouts** have been developed. With these new additions, all GI treatment protocols are now accompanied by protocol-specific Patient Handouts. This is part of the goal to expand the availability of patient information for the BC Cancer Agency chemotherapy protocols.
- **Eligibility of long-acting octreotide for GI neuroendocrine tumours (NETs)** As noted in the April issue of the Systemic Therapy Update ([www.bccancer.bc.ca/HPI/ChemotherapyProtocols/stupdate](http://www.bccancer.bc.ca/HPI/ChemotherapyProtocols/stupdate)), the benefit status of octreotide for this indication is undergoing review. As we continue to work towards resolution of various logistic challenges, NO CHANGE will be implemented at this time. Long-acting octreotide (GIOCTLAR) will remain a class II benefit for patients with metastatic or unresectable NETs of fore, mid and hind gut origin who have functional (secretory) tumours and related symptoms until further notice. Note that monthly doses higher than 30 mg will continue to require Compassionate Access Program (CAP) approval.
- **All GI protocols and PPPOs** have been revised so the wording is consistent for the timing of blood work.

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## DRUG UPDATE – TEMPORARY CARBOPLATIN SHORTAGE

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There is a temporary shortage of CARBOplatin supply from both Canadian manufacturers (Hospira, Teva), tentatively until June 2011. Alternative treatment plans may need to be considered when supplies are exhausted. The following strategies can be considered:

- Prioritize supply for curative or adjuvant therapy
- Choose a non-CARBOplatin containing alternative regimen
- Substitute with CISplatin; if CARBOplatin is used as an option for renally impaired patients treated with CISplatin, consider a non-CISplatin containing alternative regimen or holding CISplatin dose
- Delay the start of the CARBOplatin containing regimen

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## BCCA COMPASSIONATE ACCESS PROGRAM (CAP) UPDATE

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The CAP application process provides access to evidence-based treatments that are indicated in unusual or exceptional clinical circumstances, or are under review for formal implementation, as well as certain funded programs. Approval is on a **case-by-case basis** and each CAP request is reviewed by a CAP pharmacist, a Tumour Group designate and a Provincial Systemic Therapy Program designate. The CAP program has recently been enhanced with features relating to maintaining the anonymity of reviewers and developing a formalized appeal process.

The CAP program will maintain anonymity of the reviewers in all written and/or verbal communication with requestors and/or designates. These changes were adopted in order to preserve the objectivity of the reviewers who are involved in assessing the requests, and to maintain the integrity of the CAP program.

During an appeal process, a requestor can appeal a denied outcome in the form of a new CAP application by including additional supporting clinical information and/or literature evidence. The reapplication must be marked by the requestor as an appeal of a previous application that was previously denied. The appeal will be reviewed by a different Tumour Group or Systemic Program Designate, and the final binding decision will be made by the Provincial Systemic Therapy Program designate.

Requestors are asked to send all questions/clarifications pertaining to an application via email to the CAP mailbox ([cap\\_bcca@bccancer.bc.ca](mailto:cap_bcca@bccancer.bc.ca)). These will be forwarded to the appropriate designate who may change frequently depending on designate availability. The emails will also allow the CAP office to maintain written documentation on each request.

Further information can be found on our website at: [www.bccancer.bc.ca/HPI/ChemotherapyProtocols](http://www.bccancer.bc.ca/HPI/ChemotherapyProtocols).

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## CONTINUING EDUCATION – PHARMACY RESOURCES ON BCCA WEBSITE

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The **Pharmacy Resources** section of the BCCA Website has been updated: ([www.bccancer.bc.ca/RS/CommunitiesOncologyNetwork/Educators](http://www.bccancer.bc.ca/RS/CommunitiesOncologyNetwork/Educators))

- **Pharmacy Guide to Chemotherapy: Clinical Assessment and Review, Version 3 (or “Clinical Pharmacy Guide”)** is now available. This guide was previously known as the “*Pharmacy Guide to BC Cancer Agency Chemotherapy Protocols*”. Changes to version 3 include:
  - The Procedure for Checking Chemotherapy Order section and the corresponding checklist (Appendix A) have been reorganized to a ten-step process.
  - New content has been added to the Laboratory Test Interpretation section. A Lab Test Interpretation table has also been added (Appendix D).

- A new erlotinib case has been added to illustrate the process of checking oral chemotherapy orders.
- **New Inservices on the Pharmacy Education Page:**  
[www.bccancer.bc.ca/RS/CommunitiesOncologyNetwork/Educators/Education](http://www.bccancer.bc.ca/RS/CommunitiesOncologyNetwork/Educators/Education)
  - Staying on Track with Oral Targeted Therapy Inservice
  - Everolimus: New Hope for Patients with Advanced Renal Cell Carcinoma

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### COMMUNITIES ONCOLOGY NETWORK – SENIOR DIRECTOR

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The BC Cancer Agency’s Communities Oncology Network (CON) is a collaborative working partnership between all BC Health Authorities’ CON sites and the BCCA. Dr. Charles Blanke, BCCA Vice President of Provincial Systemic Therapy, has created the new Senior Director position to support the CON and to develop a stronger relationship and partnership with the Health Authorities.

Johanna den Duyf from the BC Cancer Agency is the new Senior Director. She is excited about the opportunity to work closely with all key stakeholders in the Health Authorities across B.C. Johanna has worked as the Director of Clinical Operations in Systemic Therapy at the Vancouver Island Centre for 13 years and has a keen interest in and passion for community oncology. Johanna will work closely with senior leaders in the Health Authorities and at each of the BCCA Regional Centres across the province to develop a strategic path for a strong and sustainable network of services for cancer patients in British Columbia.

This initiative recognizes the significant contributions of B.C. healthcare organizations and their teams of dedicated professionals who ensure that cancer care services are available to patients and their care providers in the appropriate setting at the appropriate time.

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

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**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
GICPART	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Curative-intent combined modality therapy for cancer of the anal canal, using CISplatin, capecitabine and radiation therapy
GIFUART	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Curative-intent combined treatment for cancer of the anal canal using mitomycin, infusional fluorouracil and radiation therapy
GIFUPART	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Curative-intent combined treatment for cancer of the anal canal using CISplatin, infusional fluorouracil and radiation therapy
UGIGAVCCT	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Palliative treatment of metastatic or inoperable, locally advanced stomach or stomach-esophagus junction cancer using CISplatin, capecitabine and trastuzumab

CODE	Protocol	PPPO	Patient Handout	Protocol Title
UGIGAVCFT	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Palliative treatment of metastatic or inoperable, locally advanced stomach or stomach-esophagus junction cancer using CISplatin, infusional fluorouracil and trastuzumab
GIGAVTR	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Palliative treatment of metastatic or inoperable, locally advanced stomach or stomach-esophageal junction cancer using trastuzumab
UMYMPT	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Treatment of multiple myeloma using melphalan, prednisone and thalidomide

**REVISED PROTOCOLS, PPPOS AND PATIENT HANDOUTS (AFFECTED DOCUMENTS ARE CHECKED):**

CODE	Protocol	PPPO	Patient Handout	Changes	Protocol Title
UCNBEV	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<i>Eligibility clarified</i>	Palliative Therapy for Recurrent Malignant Gliomas Using Bevacizumab
UGIAVPANI	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<i>Eligibility clarified for patients with hepatic impairment</i>	Palliative third line treatment of metastatic colorectal cancer using panitumumab
UGUTIP	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<i>Premedications added for PACLitaxel, reformatted for TALLman lettering</i>	Advanced therapy for relapsed testicular germ cell cancer using PACLitaxel, Ifosfamide and CISplatin (TIP)
LUAVERL	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<i>LDH added to Tests section</i>	Treatment of advanced non-small cell lung cancer (NSCLC) with erlotinib
LUAVPEM	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<i>Eligibility clarified, LDH added to Tests section</i>	Second-line treatment of advanced non-small cell lung cancer (NSCLC) with pemetrexed
ULUAVPMTN	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<i>LDH added to Tests section</i>	Maintenance therapy of advanced non-small cell lung cancer (NSCLC) with pemetrexed
ULUAVPP	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<i>Eligibility clarified, LDH added to Tests section</i>	First-line treatment of advanced non-small cell lung cancer with platinum and pemetrexed
LUMMPG	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<i>LDH added to Tests section</i>	Treatment of malignant mesothelioma with platinum and gemcitabine
LUMMPP	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<i>LDH added to Tests section</i>	Treatment of malignant mesothelioma with platinum and pemetrexed
LYABVD	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<i>ANC threshold revised</i>	Treatment of Hodgkin lymphoma with DOXOrubicin, bleomycin, vinBLASStine, and dacarbazine
LYCVPPABO	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<i>Treatment duration and PET scan clarified</i>	Treatment of Hodgkin lymphoma with cyclophosphamide, vinBLASStine, procarbazine and prednisone
UMYMPT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<i>Eligibility, dosing, references and access procedure for thalidomide updated</i>	Treatment of multiple myeloma using melphalan, prednisone and thalidomide

CODE	Protocol	PPPO	Patient Handout	Changes	Protocol Title
MYPAM	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<i>Reference clarified</i>	Treatment of multiple myeloma with pamidronate

## REVISED PROTOCOLS AND PPPOs RELATED TO STANDARDIZING APREPITANT DOSING TIME

CODE	Protocol	PPPO	Protocol Title
GOBEP	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Therapy of non-dysgerminomatous ovarian germ cell cancer using bleomycin, etoposide and CISplatin
GOEP	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Therapy of dysgerminomatous ovarian germ cell cancer using CISplatin and etoposide
GOOVCS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Therapy for invasive epithelial ovarian cancer using CISplatin
GOSMCCRT	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Treatment of small cell or neuroendocrine carcinoma of gynecologic system origin using PACLitaxel, CISplatin, etoposide and CARBOplatin with radiation
UGUAJPG	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Adjuvant therapy for urothelial carcinoma using CISplatin and gemcitabine
GUEP	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Therapy for nonseminoma germ cell cancer using etoposide-CISplatin
GUNAJPG	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Neo-adjuvant therapy for urothelial carcinoma using CISplatin and gemcitabine
UGUTIP	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Advanced therapy for relapsed testicular germ cell cancer using PACLitaxel, Ifosfamide and CISplatin (TIP)
HNAVFUP	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Treatment for advanced nasopharyngeal cancer of the head and neck using CISplatin and fluorouracil
HNAVPE	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Treatment for intensive CISplatin and etoposide chemotherapy for recurrent and metastatic head and neck cancer (squamous cell carcinoma)
HNAVFUP	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Intensive CISplatin and etoposide chemotherapy for recurrent and metastatic head and neck cancer (nasopharyngeal)
HNAVPG	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Treatment of locoregionally recurrent and/or metastatic nasopharyngeal cancer with CISplatin and gemcitabine
HNNLAPG	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Induction treatment of locally advanced nasopharyngeal cancer with CISplatin and gemcitabine
HNSAVFUP	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Treatment for advanced nasopharyngeal cancer of the head and neck using CISplatin and fluorouracil

## WEBSITE RESOURCES AND CONTACT INFORMATION

<b>WEBSITE RESOURCES</b>	<a href="http://www.bccancer.bc.ca">www.bccancer.bc.ca</a>
REIMBURSEMENT AND FORMS: BENEFIT DRUG LIST, CLASS II, BC CANCER AGENCY COMPASSIONATE ACCESS PROGRAM	<a href="http://www.bccancer.bc.ca/HPI/ChemotherapyProtocols/Forms">www.bccancer.bc.ca/HPI/ChemotherapyProtocols/Forms</a>
CANCER DRUG MANUAL	<a href="http://www.bccancer.bc.ca/cdm">www.bccancer.bc.ca/cdm</a>
CANCER MANAGEMENT GUIDELINES	<a href="http://www.bccancer.bc.ca/CaMgmtGuidelines">www.bccancer.bc.ca/CaMgmtGuidelines</a>
CANCER CHEMOTHERAPY PROTOCOLS, PRE-PRINTED ORDERS, PROTOCOL PATIENT HANDOUTS	<a href="http://www.bccancer.bc.ca/ChemoProtocols">www.bccancer.bc.ca/ChemoProtocols</a>
SYSTEMIC THERAPY PROGRAM POLICIES	<a href="http://www.bccancer.bc.ca/HPI/ChemotherapyProtocols/Policies">www.bccancer.bc.ca/HPI/ChemotherapyProtocols/Policies</a>
SYSTEMIC THERAPY UPDATE	<a href="http://www.bccancer.bc.ca/HPI/ChemotherapyProtocols/stupdate">www.bccancer.bc.ca/HPI/ChemotherapyProtocols/stupdate</a>

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PROVINCIAL SYSTEMIC THERAPY PROGRAM .....	Ext 2247 .....	<a href="mailto:mclin@bccancer.bc.ca">mclin@bccancer.bc.ca</a>
COMMUNITIES ONCOLOGY NETWORK BUSINESS AFFAIRS.....	Ext 2744 .....	<a href="mailto:david.leung@bccancer.bc.ca">david.leung@bccancer.bc.ca</a>
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