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FAX request form and IN TOUCH phone list are provided if additional information is needed.

HIGHLIGHTS OF PROTOCOL CHANGES

The Gastrointestinal Tumour Group has revised the **first-line therapy of metastatic colorectal cancer**. In patients with good performance status, the GIIRFUFA protocol has been removed as a standard treatment option due to its increased potential for toxicity. This is the "Saltz" regimen, which uses <u>bolus fluorouracil</u>, leucovorin [folinic acid] and irinotecan. The preferred treatment now is either the GIFOLFIRI regimen, which uses <u>bolus</u> <u>and infusional fluorouracil</u>, leucovorin and irinotecan, or UGIFOLFOX protocol (bolus and infusional fluorouracil, leucovorin, oxaliplatin). Also, the number of treatment cycles of the UGIFOLFOX protocol has been extended from 8 to 12 cycles in responding patients.

A new protocol UGICAPOX (capecitabine, oxaliplatin) for metastatic colorectal cancer has been introduced for special circumstances. More details are available in the protocol eligibility and exclusion criteria. Note that the use of UGIFOLFOX and UGICAPOX protocols must be requested through the undesignated indication process. Supply of oxaliplatin for these protocols also requires Health Canada Special Access Programme approval. For information. individual protocols more see the on the BC Cancer Agency website (http://www.bccancer.bc.ca/ChemoProtocols/) under Health Professionals Info, Chemotherapy Protocols.

BENEFIT DRUG LIST

Irinotecan in combination with bolus fluorouracil and leucovorin for metastatic colorectal cancer (GIIRFUFA) has been deleted from the Benefit Drug List. Patients currently being treated with GIIRFUFA should preferably be switched over to the GIFOLFIRI protocol (see Highlights of Protocol Changes above). However, additional undesignated indication approval is not required for patients who have already been started on the GIIRFUFA protocol to complete the remaining of their treatments.

The current Benefit Drug List, Class II forms and Undesignated Indication Application forms are available on the BC Cancer Agency website (<u>http://www.bccancer.bc.ca/ChemoProtocols/Forms/</u>) under Health Professionals Info, Chemotherapy Protocols, Frequently Used Forms.

LIST OF NEW AND REVISED PROTOCOLS

INDEX to BC Cancer Agency Protocol Summaries revised monthly (include tumour group, protocol code, indication, drugs, last revision date and version). Protocol codes for treatments requiring "Undesignated Indication" approval prior to use are prefixed with the letter U.

- **BRAVTRNAV** revised (clarification of loading dose): Palliative therapy for metastatic breast cancer using trastuzumab (Herceptin®) and vinorelbine
- **<u>GI Protocols revised</u>**: Information on how to contact physicians has been revised on all GI protocols.
- **(U)GICAPOX** new: Palliative combination chemotherapy for metastatic colorectal cancer using oxaliplatin, and capecitabine
- **(U)GIFOLFOX** revised (number of cycles extended to 12, contact physician): Palliative combination chemotherapy for metastatic colorectal cancer using oxaliplatin, 5-fluorouracil and folinic acid (leucovorin)
- **(U)GIIRFUFA** revised (requirement for undesignated approval added): Palliative Combination chemotherapy for metastatic colorectal cancer using irinotecan, fluorouracil and folinic acid (leucovorin)
- **GUVIP2** revised (Day 5 cisplatin dose clarified): Nonseminoma consolidation / salvage protocol using etoposide, cisplatin, ifosfamide, mesna
- **SAAJAP** (protocol code changed from OSAJAP, hydration fluid): Adjuvant therapy for osteosarcoma using doxorubicin (Adriamycin®) and cisplatin
- **SAAVAP** (protocol code changed from OSAVAP, hydration fluid): Therapy of advanced osteosarcoma using doxorubicin (Adriamycin®) and cisplatin

Protocols are available on the BC Cancer Agency website (<u>http://www.bccancer.bc.ca/ChemoProtocols/</u>) under Health Professionals Info, Chemotherapy Protocols.

CANCER MANAGEMENT GUIDELINES

Metastatic Colorectal Cancer The section on the first-line therapy has been updated to reflect the change in preferred treatment regimens. For more details, see Highlights in Protocol Changes above or go to our website under <u>Health Professionals Info, Cancer Management Guidelines, Gastrointestinal, Colon, Management, Palliative Treatment</u>.

The Cancer Management Guidelines are available on the BC Cancer Agency website (<u>http://www.bccancer.bc.ca/CaMgmtGuidelines/</u>) under Health Professionals Info, Cancer Management Guidelines.

PRE-PRINTED ORDER UPDATE

Pre-printed orders should always be checked with the most current BC Cancer Agency protocol summaries. The BC Cancer Agency Vancouver Centre has prepared chemotherapy pre-printed orders, which can be used as a guide for reference. An index to the orders can be obtained by Fax-back.

- **BRAJAC** new: Adjuvant therapy for breast cancer using doxorubicin and cyclophosphamide
- **UBRAJACT** new: Adjuvant Therapy for breast cancer using doxorubicin and cyclophosphamide followed by paclitaxel (Taxol ®)
- **BRAVAC** new: Palliative therapy for metastatic breast cancer using doxorubicin and cyclophosphamide
- **BRAVCAD** revised (antiemetic section): Palliative therapy for metastatic breast cancer using docetaxel and capecitabine
- **BRAVDOC** revised (antiemetic section): Palliative therapy for metastatic breast cancer using docetaxel (Taxotere[®])
- **BRAVDOC7** revised (antiemetic section): Palliative therapy for metastatic breast cancer using weekly docetaxel (Taxotere®)
- **BRAVTAX** new: Palliative therapy for metastatic breast cancer using paclitaxel (Taxol®)
- **UBRLAACD** new: Treatment for locally advanced breast cancer using doxorubicin and cyclophosphamide followed by docetaxel
- **UGOCXCAD** new: Primary treatment of advanced/recurrent non-small cell cancer of the cervix with carboplatin and docetaxel in ambulatory care settings
- **GOENDCAD** new: Treatment of primary advanced or recurrent endometrial cancer using carboplatin and docetaxel
- **GOOVCADM** new: Primary treatment of invasive epithelial ovarian, fallopian tube and primary peritoneal cancer, with no visible residual tumour (moderate-high risk)
- **GOOVCADR** new: Second line treatment using docetaxel and carboplatin for epithelial ovarian cancer relapsing after primary treatment
- **GOOVCADX** new: Primary treatment of visible residual (extreme risk) invasive epithelial ovarian cancer
- **GOOVDOC** new: Treatment of progressive, platinum-refractory epithelial ovarian carcinoma, primary peritoneal carcinoma or fallopian tube carcinoma using docetaxel
- **GUPDOC** revised (antiemetic section): Palliative therapy for metastatic hormone refractory prostate cancer using docetaxel

PATIENT EDUCATION

Lidocaine Infusion for Pain Patient information handout has been developed for the supportive care protocol of using parenteral lidocaine for extreme pain (SCPAINLI).

Patient information handouts for cancer drugs are available on the BC Cancer Agency website (<u>www.bccancer.bc.ca/DrugDatabasePt/</u>) under Health Professionals Info, Cancer Drug Manual, Drug Information for the Patient. For treatment protocol specific information, go to the BC Cancer Agency website (<u>www.bccancer.bc.ca</u>) under <u>Health Professionals Info</u>, Chemotherapy Protocols, Information for the Patient.

CANCER DRUG MANUAL

The Cancer Drug Manual is available on the BC Cancer Agency website www.bccancer.bc.ca/cdm/.

FOCUS ON BCCA CONTINUING EDUCATION MODULE: PHARMACY GUIDE TO BCCA CHEMOTHERAPY PROTOCOLS

We are proud to announce that the Pharmacy Communities Oncology Network (CON) Educators at the BC Cancer Agency (BCCA) will be releasing the first continuing education module titled **"Pharmacy Guide to BCCA Chemotherapy Protocols"** in the fall of 2003. This module will address clinical interpretation and application of the BCCA chemotherapy protocol summaries. Developed as a result of a province-wide needs assessment conducted in July 2002, this module is a timely release for those pharmacists chosen to participate in the first cycle of the new Professional Development and Assessment Program (PDAP) through the College of Pharmacists of BC. This module relates to **roles 1, 4 and 5**, as defined in the Framework of Professional Practice (FPP), and is an excellent tool for those pharmacists choosing the Learning Practice Portfolio (LPP) option.

Due for release in November 2003, the module is designed for pharmacists providing oncology care in their community hospital setting. The module is a comprehensive document covering topics that will help a pharmacist clinically interpret information that can be practically applied to the BCCA protocols. From patient specific details to broader issues on clinical interpretation of lab tests, from practical drug delivery methods to supportive care issues, this module takes into account day-to-day concerns a hospital pharmacist encounters when providing oncology care to a patient. Working with UBC, the Pharmacy CON Educators are pursuing accreditation for continuing education (CE) units, so this module can be used to earn CE credits, as well as be a documentation tool in the LPP.

Almost one-half of all pharmacists in BC have been chosen to participate in this first cycle of the PDAP. If choosing the LPP as an assessment option, the module can be applied to the following roles in the FPP:

- Role 1 Provide Pharmaceutical Care: Once a pharmacist has read the module, and worked through the case studies, the skills learned through this module support all functions in providing pharmaceutical care, including assessment, development and supporting the care plan, as well as monitoring and documenting.
- Role 4 Maintain professional development and contribute to the professional development of others: This module was specifically designed to support the professional development of hospital pharmacists providing oncology care in the community hospital setting.
- Role 5 Contribute to the effectiveness of the health care system: The module specifically supports Functions B and D in this role, which is to advocate and support policies that promote improved health outcomes, as well as contribute to the education and training of students and other health professionals.

The Pharmacy CON Educators are excited to be sharing this CE module with hospital pharmacists across the province, and feel strongly this is a needed and helpful tool in the day-to-day care of oncology patients. The timely release of this module complements the introduction of the new Professional Development and Assessment Program and provides a viable option in documentation for those pharmacists choosing the Learning Practice Portfolio.

Nancy Coady Pharmacy CON Educator BCCA – Vancouver Island Centre

> PROVINCIAL SYSTEMIC THERAPY PROGRAM POLICIES

BC Cancer Agency Systemic Therapy Policies are available on the BC Cancer Agency website (<u>http://www.bccancer.bc.ca/ChemoProtocols/Policies/</u>) under Health Professionals Info, Chemotherapy Protocols, Policies and Procedures.

LIBRARY/CANCER INFORMATION CENTRE

Unconventional Cancer Therapies Manual is available on the BC Cancer Agency website www.bccancer.bc.ca under Patient/Public Info, Unconventional Therapies. The manual consists of 46 short monographs on the more commonly used unconventional cancer therapies (e.g., Essiac, vitamins, teas, shark cartilage) and includes tips for the patient and family on how unconventional therapies can be evaluated. For each therapy the manual provides proponent/advocate claims, as well as evidence-based evaluation/critique quotations from the literature.

This manual is currently being revised and the Fourth Edition will be published in the near future.

NURSING PRACTICE

When Your Patient Asks About 'Flu Shots

As winter approaches, we are all encouraged to get a 'flu shot. Often, patients and their health care professionals ask us if a 'flu shot might have a negative impact on the immune functioning of those patients who have lymphoma, Hodgkin's disease, myeloma or other cancers involving the immune system.

The information at www.bccancer.bc.ca/HPI/CancerManagementGuidelines/Lymphoma/AppendixIII will be helpful to you. This information sheet states that all patients, including those with the aforementioned cancers can safely have a 'flu shot to afford them protection throughout the winter season. Patients can have these shots while they are receiving chemotherapy or radiation therapy.

The information sheet also points out that other vaccinations that involve live vaccines may be dangerous to these patients.

You can easily link from that section to the websites of Health Canada Travel Medicine Program and BC Centre for Disease Control for more detailed information about immunizations.

Judy Oliver **BCCA Education Resource Nurse**

CONTINUING EDUCATION

British Columbia Cancer Agency Annual Cancer Conference 2003 This year's conference will be held from November 27 to 29, 2003 at The Fairmont Vancouver Hotel in Vancouver.

The **Partners in Cancer Care** meeting will be held on Thursday, November 27. The meeting will focus on The Evolving Regional, Provincial and BC Cancer Agency Collaboration in Planning and Delivery of Cancer *Care*, with representation from health professionals who care for cancer patients throughout British Columbia.

The focus of the Clinical-Scientific meetings on Friday and Saturday will be on "Risk Reduction in Cancer Incidence". This is open to all healthcare professionals and is an academic evidence-based exploration of new scientific insights that hold potential to improve cancer care.

The **Provincial Oncology Professionals** education and business meetings will be held on all three days of the conference for the following disciplines:

November 27 Nursing •

Pathology

Psychosocial Oncology

Psychosocial Oncology

- Nutrition
- November 28
 - Nursing
 - Nutrition
- November 29
 - Family Practice •
 - Radiation Oncology Radiation Therapy Pharmacy
 - Pediatric Oncology Surgical Oncology
 - Oral Oncology /Dentistry

For details about the conference, click on the link: <u>http://www.bccancer.bc.ca/HPI/ACC2003</u> or call (604) 877-6098 local 2744, or toll-free 1-800-663-3333, local 2744.

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Vancouver Centre (VCC)	(604)-877-6000	Toll-Free 1-(800)-663-3333
Vancouver Island Centre (VICC)	(250) 519-5500	Toll-Free 1-(800)-670-3322

BC CANCER AGENCY SYSTEMIC THERAPY UPDATE REQUEST FORM

FAX (604) 877-0585

TO SUBSCRIBE: FAX OR EMAIL YOUR REQUEST OR CALL @ 877-6098 LOCAL 2247

FOR URGENT REQUESTS PLEASE CALL (604) 877-6098 LOCAL 2247

OR TOLL-FREE IN BC 1-800-663-3333 LOCAL 2247

PLEASE FEEL FREE TO MAKE COPIES FOR YOUR COLLEAGUES

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E-mail (Word 6.0)	@
🗌 Fax	() Attn:

UPDATES Please **☑** Fax-Back information below:

Most items have been hyperlinked for easy access

All items for November 2003
Cancer Drug Manual Monographs: (also available on our website www.bccancer.bc.ca)
Patient Education Handout: (also available on our website www.bccancer.bc.ca)
Pre-printed Orders:
BRAJAC BRAVCAD BRAVTAX GOENDCAD GOOVCADX
UBRAJACT BRAVDOC UBRLAACD GOOVCADM GOOVDOC
BRAVAC BRAVDOC7 UGOCXCAD GOOVCADR GUPDOC
Protocol Summaries: (also available on our website www.bccancer.bc.ca)
Index of Protocol Summaries Index_NT Index_W6
BRAVTRNAV GI protocols GI UGICAPOX GI UGIFOLFOX
UGIIRFUFA GUVIP2 SAAJAP SAAVAP
Provincial Systemic Therapy Program Policies
Reimbursement (also available on our website www.bccancer.bc.ca)
Benefit Drug List (01 November 2003)
Class 2 Form (01 November 2003)
Systemic Therapy Update Index (also available on our website www.bccancer.bc.ca)
<u>Jan-Dec 2000</u>
<u>Jan-Dec 2001</u>
<u>Jan-Dec 2002</u>
Jan-Jun 2003