Systemic Therapy Update

BC Cancer Agency
CARE + RESEARCH
An agency of the Provincial Health Services Authority

Volume 12, Number 7 *for health professionals who care for cancer patients* July 2009
*Website access at http://www.bccancer.bc.ca/HPI/ChemotherapyProtocols/stupdate.htm*

INSIDE THIS ISSUE



## EDITOR'S CHOICE:

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

The **Gastrointestinal Tumour Group** has introduced **panitumumab** as a third line treatment for patients whose metastatic colorectal cancer has failed fluorouracil, irinotecan and oxaliplatin, and whose tumour has been shown to be of wild type KRAS (**UGIAVPANI**). BCCA Compassionate Access Program (CAP) approval will need to be obtained prior to use.

K-RAS testing for patients who are being considered for panitumumab therapy will be available starting on July 1st, 2009. The requisition is available online on the BCCA website under Laboratory Services → Pathology Request Forms (see KRAS Test Request for Metastatic Colorectal Cancer). For more details, see **Panitumumab** in the **Drug Update** section in this issue.

The **Genitourinary Tumour Group** has introduced the option of **combined androgen blockade** with **bicalutamide** (preferred) or **flutamide** and a **LHRH agonist** therapy for patients with advanced prostate cancer. A large number of patients are expected to receive this combined treatment program annually which will have a significant impact on the associated workload for the pharmacists, both within the BC Cancer Agency and in the Communities Oncology Network. Therefore, physicians should commence patients on combined androgen blockade only when they are due for the next prescription of LHRH agonists. In addition, physicians should prescribe sufficient medication for the same duration of drug therapy for both the long-acting LHRH agonist and bicalutamide, so that the patient only makes one visit to the pharmacy to have both drugs dispensed.

The **Leukemia/BMT Group** has introduced **nilotinib** as a new alternative to dasatinib for patients with imatinib-resistant chronic myeloid leukemia (**ULKCMLN**) in an advanced setting. This protocol will require a CAP approval.

**Panitumumab (VECTIBIX®)** is a recombinant, human monoclonal antibody that binds specifically to the human epidermal growth factor receptor (EGFR). It is indicated as a single agent therapy for patients with EGFR-expressing, metastatic colorectal carcinoma which has progressed on or following fluoropyrimidine-, oxaliplatin-, and irinotecan-containing chemotherapy regimens. The KRAS gene is part of the EGFR signalling cascade. Mutated KRAS in the tumour cell may render EGFR inhibitors ineffective. Therefore, patients should have tumours which have wild type (non-mutated) KRAS to receive panitumumab therapy.

KRAS testing is available at the BCCA for metastatic colorectal cancer patents eligible for anti-EGFR therapy and who have progressed after second line treatment. The testing is performed on archived tissue from either the primary or metastatic lesion. If primary tumour is not available, a core biopsy will be required. DNA extraction and KRAS testing will be performed and the results (specifying mutant KRAS or wild type KRAS status) will be sent to the requesting physician and to the hospital from which the block was received. The block will then be returned to the originating hospital. In addition, the results will be filed in CAIS. To allow for batch testing, the turnaround time is expected to be several weeks from the receipt of blocks (up to 6 weeks). Therefore, it is recommended that testing be considered for patients during their second line of therapy to ensure sufficient lead time for KRAS status results prior to consideration for third line panitumumab.

The requisition is available online on the BCCA website under Laboratory Services → Pathology Request Forms (see KRAS Test Request for Metastatic Colorectal Cancer). While this is a standard clinical test, it requires a signed and witnessed patient consent for tissue acquisition to enable submission of blocks and/or slides from our local hospitals to the BCCA lab.

**Lapatinib (TYKERB®)** is an oral receptor tyrosine kinase inhibitor, targeting both the HER-1 and HER-2 receptors. It is approved by Health Canada in combination with **capecitabine** for the treatment of patients with advanced breast cancer whose tumours overexpress HER-2. Patients should have received prior taxanes, anthracyclines and tratuzumab. Full prescribing information is available at http://www.gsk.ca/english/docs-pdf/Tykerb_PM_20090514_EN.pdf

Currently, the BCCA has no funding for lapatinib. However, capecitabine will be funded when used as part of this combination therapy. To initiate this treatment:

1. The physician needs to obtain CAP approval.
2. Complete the TYKERB® Patient Assistance Program (one page form) and fax to 888-475-3291 (telephone 888-475-4255). The program will coordinate coverage if the patient has third party coverage or asses their ability to afford therapy or provide a compassionate supply.
3. Lapatinib will be dispensed by Shoppers Drug Mart Specialty Health Network directly to the patient or the pharmacy of their choice (**not** the BCCA regional centre pharmacy).
4. The capecitabine will be dispensed through the BCCA regional centre pharmacy or CON hospital pharmacy as per standard practice.

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

**BC Cancer Agency Protocol Summaries, Provincial Pre-Printed Orders (PPPOs) and Patient Handouts** are revised periodically. New and revised protocols, PPPOs and patient handouts for this month are listed below. Protocol codes for treatments requiring "Compassionate Access Program" (previously Undesignated Indication 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 |
|---|---|---|---|---|
| **UGIAVPANI** | ☑ | ☑ | ☐ | Palliative Third Line Treatment of Metastatic Colorectal Cancer with Wild Type KRAS Using Panitumumab |
| **ULKCMLN** | ☑ | ☑ | ☐ | Treatment of Chronic Myeloid Leukemia and Ph+ Acute Lymphoblastic Leukemia Using Nilotinib |

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

| CODE | Protocol | PPPO | Patient Handout | Changes | Protocol Title |
|---|---|---|---|---|---|
| **GIFUC** | ☑ | ☑ | ☐ | *Clarification of weekly treatment cycles* | Palliative Chemotherapy for Upper Gastrointestinal Tract Cancer (Gastric, Esophageal, Gall Bladder, Pancreas Carcinoma and Cholangiocarcinoma) and Metastatic Anal using Infusional Fluorouracil and Cisplatin |
| **GUBEP** | ☑ | ☑ | ☐ | *Bleomycin dosing reformatted in PPPO, Eligibility criteria and Treatment section clarified in protocol* | Treatment with Bleomycin, Etoposide, Cisplatin for Germ Cell Cancers |
| **GUPNSAA** | ☑ | ☑ | ☐ | *Total androgen blockade indication added to Eligibility. References added. Title revised.* | Treatment of Prostate Cancer with Non-Steroidal Antiandrogens |
| **HNLANPRT** | ☑ | ☐ | ☐ | *Number of treatment cycles clarified* | Treatment of Locally Advanced Nasopharyngeal Cancer with Concurrent Cisplatin and Radiation |

## WEBSITE RESOURCES

The following are available on the BC Cancer Agency website (www.bccancer.bc.ca) under the Health Professionals Info section:

| | |
|---|---|
| REIMBURSEMENT AND FORMS: BENEFIT DRUG LIST, CLASS II, BC CANCER AGENCY COMPASSIONATE ACCESS PROGRAM (UNDESIGNATED INDICATION) | www.bccancer.bc.ca/HPI/ChemotherapyProtocols/Forms |
| CANCER DRUG MANUAL | www.bccancer.bc.ca/cdm |
| CANCER MANAGEMENT GUIDELINES | www.bccancer.bc.ca/CaMgmtGuidelines |
| CANCER CHEMOTHERAPY PROTOCOLS, PRE-PRINTED ORDERS AND PROTOCOL PATIENT HANDOUTS | www.bccancer.bc.ca/ChemoProtocols |

| | |
|---|---|
| SYSTEMIC THERAPY PROGRAM POLICIES | www.bccancer.bc.ca/HPI/ChemotherapyProtocols/Policies |
| SYSTEMIC THERAPY UPDATE | www.bccancer.bc.ca/HPI/ChemotherapyProtocols/stupdate |
| COMPLEMENTARY AND ALTERNATIVE CANCER THERAPIES | under Patient/Public Info, Complementary Therapies |



| **IN TOUCH** | www.bccancer.bc.ca | bulletin@bccancer.bc.ca |
|---|---|---|
| BC CANCER AGENCY | (604) 877-6000 | Toll-Free 1-(800) 663-3333 |
| PROVINCIAL SYSTEMIC THERAPY PROGRAM | Ext 2247 | mlin@bccancer.bc.ca |
| COMMUNITIES ONCOLOGY NETWORK | Ext 2744 | jvenkate@bccancer.bc.ca |
| UPDATE EDITOR | Ext 2288 | mdelemos@bccancer.bc.ca |
| COMMUNITIES ONCOLOGY NETWORK PHARMACIST | Ext 6277 | laurelk@bccancer.bc.ca |
| COMMUNITIES ONCOLOGY NETWORK PHARMACY EDUCATORS | | www.bccancer.bc.ca/RS/CommunitiesOncologyNetwork/Educators/Pharmacists/ |
| COMPASSIONATE ACCESS PROGRAM OFFICE | Ext 6277<br>Fax (604) 708-2026 | cap_bcca@bccancer.bc.ca |
| DRUG INFORMATION | Ext 6275 | druginfo@bccancer.bc.ca |
| EDUCATION RESOURCE NURSE | Ext 2638 | nursinged@bccancer.bc.ca |
| NURSING PROFESSIONAL PRACTICE | Ext 2623 | ilundie@bccancer.bc.ca |
| LIBRARY/CANCER INFORMATION | 1-(888)-675-8001<br>Ext 8003 | requests@bccancer.bc.ca |
| OSCAR HELP DESK | 1-(888)-355-0355<br>Fax (604) 708-2051 | oscar@bccancer.bc.ca |
| PHARMACY PROFESSIONAL PRACTICE | (250) 519.5574 | jkippen@bccancer.bc.ca |
| ABBOTSFORD CENTRE (AC) | (604) 851-4710 | Toll-free: 1-(877) 547-3777 |
| CENTRE FOR THE SOUTHERN INTERIOR (CCSI) | (250) 712-3900 | Toll-Free 1-(888) 563-7773 |
| FRASER VALLEY CENTRE (FVCC) | (604) 930-2098 | Toll-Free 1-(800) 523-2885 |
| 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 |