

# BCCA Protocol Summary for the Treatment of Hodgkin's Lymphoma using Cyclophosphamide, vinCRISTine and predniSONE

**Protocol Code** LYCCOP

**Tumour Group** Lymphoma

**Contact Physician** Dr. Laurie Sehn

## ELIGIBILITY:

- Hodgkin's lymphoma
- Any age
- Only for patients who are undergoing cytoreductive chemotherapy prior to high dose chemotherapy and bone marrow transplantation

## EXCLUSIONS:

- none

## TESTS:

- Baseline (required before first treatment): CBC & Diff, total bilirubin, AST, ALT
- Baseline (required, but results do not have to be available to proceed with first treatment; results must be checked before proceeding with cycle 2): HBsAg, HBsAb, HBcoreAb
- Before each treatment on Day 1 and Day 8: CBC & Diff
- If clinically indicated: HBV viral load, ALT (see protocol [SCHBV](#))

## PREMEDICATIONS:

ondansetron 8 mg PO/IV pre-chemotherapy  
dexamethasone 12 mg PO/IV pre-chemotherapy

## SUPPORTIVE MEDICATIONS:

High risk of hepatitis B reactivation. If HBsAg or HBcoreAb positive, follow hepatitis B prophylaxis as per [SCHBV](#).

## TREATMENT:

Drug	Dose	BCCA Administration Guideline
Cyclophosphamide	1200 mg/m <sup>2</sup> on day 1 and 8	IV in 250 to 500 mL NS over 20 to 60 minutes
vinCRISTine	1.4 mg/m <sup>2</sup> on day 1 and 8 (no maximum dose)	IV in 50 mL NS over 15 minutes
predniSONE	40 mg/m <sup>2</sup> /day, day 1 to 14*	PO in am with food

\*Round to the nearest 25 mg

Repeat every 28 days. Usually this protocol is given for 2 cycles before changing to the high dose treatment.

**DOSE MODIFICATIONS:****1. Hematological:**

ANC (x10 <sup>9</sup> /L)	Platelets (x10 <sup>9</sup> /L)	Dose (all drugs)
greater than 0.8	and greater than 80	100%
less than 0.8	or less than 80	If day 1, delay 1 week If day 8, omit cyclophosphamide

**2. Neurotoxicity:** vinCRISTine only:

Toxicity	Dose Modification
Dysesthesias, areflexia only	100%
Abnormal buttoning, writing	67%
Motor neuropathy, moderate	50%
Motor neuropathy, severe	Omit

**PRECAUTIONS:**

- Neutropenia:** Fever or other evidence of infection must be assessed promptly and treated aggressively.
- Extravasation:** vinCRISTine causes pain and tissue necrosis if extravasated. Refer to BCCA Extravasation Guidelines.
- Hepatitis B Reactivation:** See [SCHBV protocol](#) for more details.

**Call Dr. Laurie Sehn or tumour group delegate at (604) 877-6000 or 1-800-663-3333 with any problems or questions regarding this treatment program.**

Date activated: 01 Sep 2002 (replaced LYCOPP)

Date revised: 1 Dec 2024 (Tests, supportive medications and precautions updated)