

BC Cancer Protocol Summary for Treatment of Advanced Indolent Lymphoma using Cyclophosphamide, vinCRISTine, predniSONE (CVP)

Protocol Code

LYCVP

Tumour Group

Lymphoma

Contact Physician

Dr. Laurie Sehn

ELIGIBILITY:

Indolent T cell lymphoma or leukemia ; indolent B cell lymphoma which has been previously treated with rituximab +/- other chemotherapy within the past six months; unusual lymphoproliferative conditions such as multi-focal Castleman's disease, the histiocytosis or similar rare conditions; B cell lymphoma in patients with a contraindication to use of DOXOrubicin

- Stage IIA with more than 3 contiguous nodal sites of disease; IIB; III A or B; or IV A or B

TESTS:

- Baseline (required before first treatment): CBC & Diff, total bilirubin, 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): LDH, HBsAg, HBsAb, HBcoreAb
- Before each treatment: CBC & Diff
- If clinically indicated: HBV viral load, ALT (see protocol [SCHBV](#))

PREMEDICATIONS:

- ondansetron 8 mg PO pre-chemotherapy
- dexamethasone 12 mg PO 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	BC Cancer Administration Guideline
vinCRISTine	1.4 mg/m ² on day 1 (no maximum dose)	in 50 mL NS over 15 mins
cyclophosphamide	1000 mg/m ² on day 1	IV in 100 to 250 mL* NS over 20 min to 1 hour *Use 250 mL for dose greater than or equal to 1000 mg.
predniSONE	100 mg starting on day 1	PO daily in am with food x 5 consecutive days

Repeat every 21 or 28 days (see dose modifications) for up to a maximum of 8 cycles. For further use, Undesignated approval is required.

DOSE MODIFICATIONS:**1. Hematological:**

ANC (x 10 ⁹ /L)		Platelets (x 10 ⁹ /L)	Dose Modification
less than 1.2	or	less than 100	delay x 1 week

2. Neurotoxicity: vinCRISTine only

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

3. Hepatotoxicity: vinCRISTine only

Bilirubin (micromol/L)	Dose Modification
Less than or equal to 25	100%
26 to 50	50%
Greater than 50	25%.

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 BC Cancer Extravasation Guidelines.
- Hepatitis B Reactivation:** See [SCHBV protocol](#) for more details.

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