

Systemic Therapy Update

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For Health Professionals Who Care for Cancer Patients

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Editor's Choice

New Programs

The BC Cancer Provincial Systemic Therapy Program has approved the following new treatment programs effective 01 August 2021. Full details of all treatment programs are available in the Chemotherapy Protocols section of the BC Cancer website.

Genitourinary

Intravesical Gemcitabine and Docetaxel for Non-Muscle Invasive Bladder Cancer (GUBGEMDOC) — The BC Cancer Genitourinary Group is implementing intravesical gemcitabine/docetaxel for patients with BCG-unresponsive, high-risk non-muscle invasive bladder cancer. The efficacy of salvage gemcitabine/docetaxel after BCG failure is supported by 2-year recurrence free survival rates of roughly 50% in three retrospective series. The induction regimen includes weekly intravesical administration for 6 weeks, followed by once-monthly administration for 10 months as maintenance therapy.

Editor's Choice

New Programs

Darolutamide for Non-Metastatic, Castration-Resistant Prostate Cancer (UGUNMPDAR) — The BC Cancer Genitourinary Tumour Group is introducing darolutamide, an oral nonsteroidal androgen receptor inhibitor for use in patients with non-metastatic castration-resistant prostate cancer (nmCRPC). Approval for this treatment program is based on the phase III ARAMIS trial of darolutamide in men with nmCRPC.^{4,5} Patients were randomized to darolutamide or placebo, both on a background of androgen-deprivation therapy. Median metastasis-free survival was significantly improved with darolutamide (40.4 months vs. 18.4 months, HR 0.41, 95% CI 0.34-0.50). BC Cancer Compassionate Access Program (CAP) approval is required. Patients with nmCRPC are eligible to receive treatment with either apalutamide (UGUPAPA), darolutamide (UGUNMPDAR) or enzalutamide (UGUNMPENZ or UGUPENZ), but their sequential use is not funded.

Head and Neck

The BC Cancer Head and Neck Tumour Group is introducing pembrolizumab-containing treatment programs for use in patients with advanced, squamous cell carcinoma of the head and neck. Approval of these new programs comes from the phase III KEYNOTE-048 trial.^{6,7} BC CAP approval is required for the first-line treatment programs (UHNAVPCPMB, UHNAVPFPMB, UHNAVPMBF). After completion of a pembrolizumab-chemotherapy regimen, patients may transition to the maintenance regimen (HNAVPMBM) to complete up to 35 cycles of pembrolizumab or until disease progression.

| Protocol Title | Protocol Code |
|---|---------------|
| Paclitaxel, Carboplatin and Pembrolizumab for First-Line Treatment of Advanced Squamous Cell Carcinoma of the Head and Neck | UHNAVPCPMB |
| Platinum, Fluorouracil and Pembrolizumab for First-Line Treatment of Advanced Squamous Cell Carcinoma of the Head and Neck | UHNAVPFPMB |
| Pembrolizumab for First-Line Treatment of Advanced Squamous Cell Carcinoma of the Head and Neck | UHNAVPMBF |
| Pembrolizumab for Maintenance Treatment of Advanced Squamous Cell Carcinoma of the Head and Neck | HNAVPMBM |

Lymphoma

Doxorubicin, Vinblastine, Dacarbazine and Brentuximab Vedotin for Previously Untreated, Stage IV Hodgkin Lymphoma (LYAVDBV) — The BC Cancer Lymphoma and Myeloma Tumour Group is implementing brentuximab plus chemotherapy for patients with previously untreated, stage IV Hodgkin lymphoma (stage III disease is not funded). Approval for this treatment program is based on the phase III ECHELON-1 trial, in which patients were treated with brentuximab vedotin, doxorubicin, vinblastine and dacarbazine, or with traditional ABVD chemotherapy. ^{8,9} The 2-year modified progression-free survival rate was significantly improved in the brentuximab plus chemotherapy group (82.1% vs. 77.2%, HR 0.77, 95% CI 0.60-0.98). This regimen includes the use of filgrastim for the primary prophylaxis of neutropenia. Patients on active treatment responding to LYABVD may be eligible to switch to LYAVDBV for their remaining cycles.

Editor's Choice

New Programs

Brentuximab Vedotin for Cutaneous T-Cell Lymphoma (LYCTCLBV) — The BC Cancer Lymphoma and Myeloma Tumour Group is introducing brentuximab for patients with cutaneous T-cell lymphoma. Eligible patients must have either primary cutaneous anaplastic large cell lymphoma (pcALCL) or CD30-expressing mycosis fungoides. Approval for this treatment program is based on the phase III ACANZA trial in which patients were randomized to receive treatment with brentuximab vedotin or physician's choice (oral methotrexate or oral bexarotene). ^{10,11} Significantly more patients receiving brentuximab vedotin achieved an objective global response lasting at least 4 months (56.3% vs. 12.5%, 95% CI 29.1-58.4).

References

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- 2. Steinberg RL, Thomas LJ, O'Donnell MA, Nepple KG. Sequential intravesical gemcitabine and docetaxel for the salvage treatment of non-muscle invasive bladder cancer. *Bladder Cancer* 2015;1(1):65-72. https://doi.org/10.3233/BLC-150008
- 3. Daniels MJ, Barry E, Milbar N, et al. An evaluation of monthly maintenance therapy among patients receiving intravesical combination gemcitabine/docetaxel for nonmuscle-invasive bladder cancer. *Urol Oncol* 2020;38(2):40e17-40e24. https://doi.org/10.1016/j.urolonc.2019.07.022
- 4. Fizazi K, Shore N, Tammela TL, et al. Darolutamide in nonmetastatic, castration-resistant prostate cancer. *N Engl J Med* 2019;380(13):1235-1246. https://doi.org/10.1056/NEJMoa1815671
- 5. Pan-Canadian Oncology Drug Review (pCODR) Expert Review Committee (pERC). Final recommendation for darolutamide (Nubeqa®) for non-metastatic castration-resistant prostate cancer. 22 Apr 2020.
- 6. Burtness B, Harrington KJ, Greil R, et al. Pembrolizumab alone or with chemotherapy versus cetuximab with chemotherapy for recurrent or metastatic squamous cell carcinoma of the head and neck (KEYNOTE-048): a randomised, open-label, phase 3 study. *Lancet* 2019;394:1915-28. https://doi.org/10.1016/S0140-6736(19)32591-7
- 7. Pan-Canadian Oncology Drug Review (pCODR) Expert Review Committee (pERC). Final recommendation for pembrolizumab (Keytruda®) for head and neck squamous cell carcinoma. 22 Dec 2020.
- 8. Connors JM, Jurczak W, Straus DJ, et al. Brentuximab vedotin with chemotherapy for stage III or IV Hodgkin's lymphoma. N Engl J Med 2018;378(4):331-344. https://doi.org/10.1056/NEJMoa1708984
- 9. Pan-Canadian Oncology Drug Review (pCODR) Expert Review Committee (pERC). Final recommendation for brentuximab vedotin (Adcetris®) for stage IV Hodgkin lymphoma. 03 Dec 2020.
- 10. Prince HM, Kim YH, Horwitz SM, et al. Brentuximab vedotin or physician's choice in CD30-positive cutaneous T-cell lymphoma (ALCANZA): an international, open-label, randomised, phase 3, multicentre trial. *Lancet* 2017;390(10094):555-566. https://doi.org/10.1016/S0140-6736(17)31266-7
- 11. Pan-Canadian Oncology Drug Review (pCODR) Expert Review Committee (pERC). Final recommendation for brentuximab vedotin (Adcetris®) for primary cutaneous anaplastic large cell lymphoma mycosis fungoides. 03 Dec 2020.

Provincial Systemic Therapy Program

All Systemic Therapy policies and procedures are available on the Shared Health Organizations Portal (SHOP) <u>BC Cancer page</u>.

Revised Policy: Prevention and Management of Extravasation of Chemotherapy

The BC Cancer Provincial Systemic Therapy Program has updated **Policy III-20: Prevention and Management of Extravasation of Chemotherapy** effective 01 August 2021.

Highlights of key changes are listed below:

- Dimethylsulfoxide (DMSO) concentration has been clarified as being available as a 99.9% or 99.7% solution
- Vesicant drugs have been updated:
 - o Idarubicin has now been grouped with the other anthracyclines
 - Busulfan and treosulfan have been added to the policy

Revised Procedure: Multidose Medications in Patient Care Areas

The BC Cancer Provincial Systemic Therapy Program has approved a new procedure entitled **Multidose Medications in Patient Care Areas**, effective 01 August 2021. This procedure replaces the existing and corresponding Provincial Pharmacy Directive. The new procedure broadens the scope to cover all BC Cancer patient care areas and incorporates all multidose medication dosage forms.

What is a multidose medication?

A multidose medication refers to any medication in any dosage form that is manufactured and intended for administration of multiple doses.

What is the purpose of the procedure?

Re-use of multidose medications across multiple patients in patient care areas may lead to contamination which can be transmitted to subsequent patients. Limiting the use of multidose medications to a single patient or using single-dose alternatives, is best practice, and reduces the risk of cross-contamination and spread of infection.

There may be circumstances where there is no alternative single-use option or the use of a multidose preparation for a single patient is impractical. The purpose of this procedure is to outline the required measures for handling, labelling and storage of multidose medications when used for multiple patients.

Where multidose medications must be used for multiple patients due to feasibility or cost:

- Requests must be sent for review to the Provincial Pharmacy Professional Practice Council (P4C)
- Any additional procedures for cleaning, disinfecting or storing will be reviewed by Infection Control

Cancer Drug Manual®

All BC Cancer Drug Manual[©] documents are available in the <u>Cancer Drug Manual</u>[©] on the BC Cancer website.

Revised Documents

Highlights of key changes are listed below:

Aldesleukin Monograph

Dosage Guidelines: updated maximum dose for intralesional use

Aldesleukin Chemotherapy Preparation and Stability Chart

Product and Product Stability: updated instructions for intralesional use

Brentuximab Vedotin Monograph

Uses: updated indication for new protocol

Dosage Guidelines: added dosing for new protocol

Docetaxel Monograph

Supply and Storage: updated brand information

Parenteral Administration: updated information for intravesical administration

Dosage Guidelines: added dosing for intravesical administration, including new protocol

Docetaxel Chemotherapy Preparation and Stability Chart

New entry: added preparation information for intravesical administration for all existing brands

Deleted: deleted sanofi aventis as brand no longer marketed in Canada

Gemcitabine Monograph

Parenteral Administration: updated information for intravesical administration

Dosage Guidelines: updated dosing for intravesical administration and added new protocol

Gemcitabine Chemotherapy Preparation and Stability Chart

New entry: added preparation information for intravesical administration for all existing brands

ST Update Editorial Board

Membership Update

The Systemic Therapy Update Editorial Board would like to welcome **Rose-Marie Reddy** to the Board as **Interim Assistant Editor**. She has recently transitioned roles within BC Cancer, from Clinical Pharmacist (BC Cancer – Abbotsford) to Interim Pharmacy Education Coordinator & Residency Coordinator (Provincial Pharmacy). Rose-Marie will replace **Fatima Ladha** on the ST Update Editorial Board for the duration of Fatima's maternity/parental leave. Welcome Rose-Marie!

Benefit Drug List

New Programs

The following new treatment programs have been added to the BC Cancer <u>Benefit Drug List</u> effective 01 August 2021:

| Protocol Title | Protocol Code | Benefit Status |
|--|---------------|----------------|
| Fludarabine | BMTNOS | Class I |
| Treosulfan | BMTNOS | Class I |
| Intravesical Therapy for Non-Muscle Invasive Bladder Cancer using Gemcitabine and Docetaxel | GUBGEMDOC | Class I |
| Treatment of Non-Metastatic Castration-Resistant Prostate Cancer using Darolutamide | UGUNMPDAR | Restricted |
| First-Line Treatment of Advanced Squamous Cell Carcinoma of the Head and Neck with Paclitaxel , Carboplatin and Pembrolizumab | UHNAVPCPMB | Restricted |
| First-Line Treatment of Advanced Squamous Cell Carcinoma of the Head and Neck using Platinum , Fluorouracil and Pembrolizumab | UHNAVPFPMB | Restricted |
| First-Line Treatment of Advanced Squamous Cell Carcinoma of the Head and Neck with Pembrolizumab | UHNAVPMBF | Restricted |
| Maintenance Treatment of Advanced Squamous Cell Carcinoma of the Head and Neck with Pembrolizumab | HNAVPMBM | Class I |
| Treatment of Previously Untreated, Stage IV Hodgkin Lymphoma with Doxorubicin, Vinblastine, Dacarbazine and Brentuximab Vedotin | LYAVDBV | Class I |
| Treatment of Cutaneous T-Cell Lymphoma (CTCL) with Brentuximab Vedotin | LYCTCLBV | Class I |

Benefit Drug List

Revised Programs

The following treatment programs no longer require Compassionate Access Program (CAP) approval and have been transferred to Class I status on the BC Cancer <u>Benefit Drug List</u> effective 01 August 2021:

| Protocol Title | Protocol Code | Benefit Status |
|---|---------------|------------------------------------|
| Treatment of Metastatic or Advanced Renal Cell Carcinoma using Ipilimumab and Nivolumab | GUAVIPNI | Class I (Previously Restricted) |
| Treatment of Advanced Non-Small Cell Lung Cancer using Atezolizumab | LUAVATZ | Class I (Previously Restricted) |
| Treatment of Advanced Non-Small Cell Lung Cancer using 4-Weekly Atezolizumab | LUAVATZ4 | Class I (Previously Restricted) |
| Treatment of Advanced Non-Small Cell Lung Cancer using Nivolumab | LUAVNIV | Class I (Previously Restricted) |
| Treatment of Advanced Non-Small Cell Lung Cancer using 4-Weekly Nivolumab | LUAVNIV4 | Class I (Previously Restricted) |
| Treatment of Advanced Non-Small Cell Lung Cancer using Pembrolizumab | LUAVPMB | Class I (Previously Restricted) |
| Treatment of Advanced Non-Small Cell Lung Cancer using 6-Weekly Pembrolizumab | LUAVPMB6 | Class I (Previously Restricted) |
| First-Line Treatment of Advanced Non-Small Cell Lung Cancer using Pembrolizumab | LUAVPMBF | Class I (Previously Restricted) |
| First-Line Treatment of Advanced Non-Small Cell Lung Cancer using 6-Weekly Pembrolizumab | LUAVPMBF6 | Class I (Previously Restricted) |
| Treatment of Locally Advanced Non-Small Cell Lung Cancer using Durvalumab | LULADUR | Class I (Previously Restricted) |
| Treatment of Locally Advanced Non-Small Cell Lung Cancer using 4-Weekly Durvalumab | LULADUR4 | Class I (Previously Restricted) |
| Therapy of Acute Myeloid Leukemia using Azacitidine and Sorafenib | LKAMLAS | Class I (Previously Restricted) |
| Therapy of FLT3+ Acute Myeloid Leukemia using Midostaurin in Combination with Induction and Consolidation Chemotherapy | LKAMLMIDO | Class I (Previously Restricted) |
| Treatment of Chronic Myeloid Leukemia using Bosutinib | LKCMLB | Class I (Previously Restricted) |

Highlights of New & Revised Protocols, PPPOs and Patient Handouts

BC Cancer 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, with document revisions indicated in the respective columns. Protocol codes for treatment requiring BC Cancer Compassionate Access Program approval are prefixed with the letter **U**.

| NEW Protocols, PPPOs and Patient Handouts (new documents checked ☑) | | | | |
|---|---|-----------|-------------------------|-------------------------|
| Protocol Code | Protocol Title | Protocol | PPPO | Handout |
| GUBGEMDOC | Intravesical Therapy for Non-Muscle Invasive Bladder Cancer using Gemcitabine and Docetaxel | \square | $\overline{\checkmark}$ | |
| UGUNMPDAR | Treatment of Non-Metastatic Castration-Resistant Prostate Cancer using Darolutamide | | $\overline{\checkmark}$ | $\overline{\checkmark}$ |
| UHNAVPCPMB | First-Line Treatment of Advanced Squamous Cell Carcinoma of the Head and Neck with Paclitaxel, Carboplatin and Pembrolizumab | V | | $\overline{\checkmark}$ |
| UHNAVPFPMB | First-Line Treatment of Advanced Squamous Cell Carcinoma of the Head and Neck using Platinum, Fluorouracil and Pembrolizumab | | | |
| UHNAVPMBF | First-Line Treatment of Advanced Squamous Cell Carcinoma of the Head and Neck with Pembrolizumab | | $\overline{\checkmark}$ | V |
| HNAVPMBM | Maintenance Treatment of Advanced Squamous Cell Carcinoma of the Head and Neck with Pembrolizumab | | $\overline{\checkmark}$ | V |
| LYAVDBV | Treatment of Previously Untreated, Stage IV Hodgkin Lymphoma with Doxorubicin, Vinblastine, Dacarbazine and Brentuximab Vedotin | Ø | | |
| LYCTCLBV | Treatment of Cutaneous T-Cell Lymphoma (CTCL) with Brentuximab Vedotin | Ø | $\overline{\checkmark}$ | |

| REVISED Protocols, PPPOs and Patient Handouts (revisions in respective columns) | | | | |
|---|--|-----------------------|---------------------------------|---------|
| Protocol Code | Protocol Title | Protocol | PPPO | Handout |
| BR Breast | | | | |
| UBRAJKAD | Adjuvant Therapy for Breast Cancer using Trastuzumab Emtansine (KADCYLA) | Eligibility revised | Treatment duration clarified | |
| BRAJTR | Adjuvant Therapy for Breast Cancer using Trastuzumab Following the Completion of Chemotherapy (Sequential) | Eligibility revised | Treatment duration clarified | |
| UBRAVPBFLV | Therapy of Advanced Breast Cancer using Palbociclib and Fulvestrant with or without LHRH Agonist | Eligibility clarified | | |

| Protocol Code | Protocol Title | Protocol | PPPO | Handout |
|-----------------------|---|---|--|-----------------------------------|
| UBRAVRBFLV | Therapy of Advanced Breast Cancer using Ribociclib and Fulvestrant with or without LHRH Agonist | Eligibility clarified | Tests revised | |
| UBRAVRIBAI | Therapy of Advanced Breast Cancer using Ribociclib and Aromatase Inhibitor with or without LHRH Agonist | Eligibility reformatted; Tests revised | Tests revised | |
| BRAVTR | Palliative Therapy for Metastatic Breast Cancer using Trastuzumab | Contact Physician and treatment schedule revised | Treatment schedule revised | |
| CN Neuro-Or | cology | | | |
| CNELTZRT | Treatment of Elderly Newly Diagnosed Glioma Patient with Concurrent and Adjuvant Temozolomide and Radiation Therapy | Tests clarified | Tests clarified | |
| GI Gastrointe | estinal | | | |
| GIGAVCOXT | Palliative Treatment of Metastatic or Locally Advanced Gastric, Gastroesophageal Junction or Esophageal Adenocarcinoma using Capecitabine, Oxaliplatin and Trastuzumab | Treatment duration updated | | |
| GIPGEM | Palliative Chemotherapy for Pancreatic Adenocarcinoma, Gallbladder Cancer and Cholangiocarcinoma using Gemcitabine | Institution name and Treatment updated: Cycle 1 (weekly x7) deleted | Chemotherapy and Return Appointment Orders updated: weekly x7 option deleted | Weekly x7 option deleted |
| GU Genitour | inary | | | |
| ∪ GUAVIPNI | Treatment of Metastatic or Advanced Renal Cell Carcinoma using Ipilimumab and Nivolumab | Protocol Code (U removed) and Eligibility revised | CAP requirement and U in Protocol Code removed Induction and Maintenance PPPOs | Protocol Code revised |
| UGUNMPENZ | Therapy for Non-Metastatic Castration-Resistant Prostate Cancer using Enzalutamide | Eligibility, Exclusions and dispensing amounts updated; treatment algorithm removed | Dispensing amount updated | |
| JGUPABI | Palliative Therapy for Metastatic Castration-Resistant Prostate Cancer using Abiraterone and Prednisone | Eligibility and dispensing amounts updated; cycle length clarified; treatment algorithm removed | Dispensing amount updated | |
| UGUPAPA | Treatment of Non-Metastatic Castration-Resistant Prostate Cancer using Apalutamide | Eligibility and Exclusions updated; treatment algorithm removed | | |

| Protocol Code | Protocol Title | Protocol | PPPO | Handout |
|------------------------|--|--|---|-----------------------------|
| GUPCABA | Palliative Therapy for Metastatic Castration-Resistant Prostate Cancer using Cabazitaxel and Prednisone | Eligibility updated; treatment algorithm removed | | |
| UGUPENZ | Palliative Therapy for Metastatic Castration-Resistant Prostate Cancer using Enzalutamide | Eligibility and dispensing amounts updated; treatment algorithm removed | Dispensing amount updated | |
| HN Head and | Neck | | | |
| HNNLAPG | Induction Treatment of Locally Advanced Nasopharyngeal Cancer with Cisplatin and Gemcitabine | Tests updated | Tests updated | |
| LK Leukemia | | | | |
| ⊎LKAMLAS | Therapy of Acute Myeloid Leukemia using Azacitidine and Sorafenib | Protocol Code (U removed) and Eligibility revised | CAP requirement and U in Protocol Code removed Pre- and Post- Transplant PPPOs | |
| U LKAMLMIDO | Therapy of FLT3+ Acute Myeloid Leukemia using Midostaurin in Combination with Induction and Consolidation Chemotherapy | Protocol Code (U removed) and Eligibility revised | CAP requirement and U in Protocol Code removed | |
| ⊎LKCMLB | Treatment of Chronic Myeloid Leukemia using Bosutinib | Protocol Code (U removed) and Eligibility revised | CAP requirement and U in Protocol Code removed | |
| LU Lung | | | | |
| ⊎LUAVATZ | Treatment of Advanced Non-Small Cell Lung Cancer using Atezolizumab | Protocol Code (U removed) and Eligibility revised | CAP requirement and U in Protocol Code removed; Treatment updated | Protocol Code revised |
| ⊎LUAVATZ4 | Treatment of Advanced Non-Small Cell Lung Cancer using 4-Weekly Atezolizumab | Protocol Code (U removed) and Eligibility revised | CAP requirement and U in Protocol Code removed; Treatment Updated | Protocol Code revised |
| ⊎LUAVNIV | Treatment of Advanced Non-Small Cell Lung Cancer using Nivolumab | Protocol Code (U removed), Eligibility and Exclusions revised | CAP requirement and U in Protocol Code removed | Protocol Code revised |
| ⊎LUAVNIV4 | Treatment of Advanced Non-Small Cell Lung Cancer using 4-Weekly Nivolumab | Protocol Code (U removed), Eligibility and Exclusions revised | CAP requirement and U in Protocol Code removed | Protocol Code revised |
| ⊎LUAVPMB | Treatment of Advanced Non-Small Cell Lung Cancer using Pembrolizumab | Protocol Code (U removed) and Eligibility revised | CAP requirement and U in Protocol Code removed | Protocol Code revised |

| REVISED P | rotocols, PPPOs and Patient Handouts (| revisions in respe | ective columns) | |
|--------------------|--|---|---|-----------------------------|
| Protocol Code | Protocol Title | Protocol | PPPO | Handout |
| ⊎LUAVPMB6 | Treatment of Advanced Non-Small Cell Lung Cancer using 6-Weekly Pembrolizumab | Protocol Code (U removed) and Eligibility revised | CAP requirement and U in Protocol Code removed | Protocol Code revised |
| ⊎LUAVPMBF | First-Line Treatment of Advanced Non-Small Cell Lung Cancer using Pembrolizumab | Protocol Code (U removed) and Eligibility revised | CAP requirement and U in Protocol Code removed | Protocol Code revised |
| ⊎ LUAVPMBF6 | First-Line Treatment of Advanced Non-Small Cell Lung Cancer using 6-Weekly Pembrolizumab | Protocol Code (U removed) and Eligibility revised | CAP requirement and U in Protocol Code removed | Protocol Code revised |
| ⊎LULADUR | Treatment of Locally Advanced Non-Small Cell Lung Cancer using Durvalumab | Protocol Code (U removed) and Eligibility revised | CAP requirement and U in Protocol Code removed | Protocol Code revised |
| ⊎LULADUR4 | Treatment of Locally Advanced Non-Small Cell Lung Cancer using 4-Weekly Durvalumab | Protocol Code (U removed), Eligibility and Treatment revised | CAP requirement and U in Protocol Code removed | Protocol Code revised |
| LY Lymphom | a | | | |
| LYABVD | Treatment of Hodgkin Lymphoma with Doxorubicin, Bleomycin, Vinblastine and Dacarbazine | | Cyclophosphamide infusion revised | |
| LYFCR | Treatment of Chronic Lymphocytic Leukemia (CLL) or Prolymphocytic Leukemia with Fludarabine, Cyclophosphamide and Rituximab | | Cyclophosphamide infusion revised | |
| MY Myeloma | | | | |
| UMYDARBD | Treatment of Relapsed and Refractory Multiple Myeloma with Daratumumab in Combination with Bortezomib and Dexamethasone with or without Cyclophosphamide | Dexamethasone and cyclophosphamide regimens updated | Dexamethasone and cyclophosphamide regimens updated Cycle 2+ PPPO | |
| МҮМР | Treatment of Multiple Myeloma using Melphalan and Prednisone | Tests updated | | |
| SM Skin and | Melanoma | | | |
| SMILALD | Treatment of In-Transit Melanoma using Intralesional Aldesleukin (IL-2) | Preparation and Administration clarified | Amount dispensed clarified Inpatient PPPO | |

| Resources and Contact Information | | | |
|--|--|--|--|
| Phone | Email / Toll Free / Fax | | |
| c.ca/health-professionals/clinical-resources/s | ystemic-therapy/systemic-therapy-update | | |
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