Provincial Health Services Authority

Systemic Therapy Update

Volume 28 Issue 8
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For Health Professionals Who Care for People with Cancer

Inside This Issue:

Editor's Choice

New Programs

BC Cancer Provincial Systemic Therapy has approved the following new treatment programs effective 01 August 2025. Full details of all treatment programs are available in the Chemotherapy Protocols section of the BC Cancer website.

Genitourinary

Enzalutamide for Castration-Sensitive High-Risk Non-Metastatic Prostate Cancer (UGUPAJENZ) – The BC Cancer Genitourinary Tumour Group is implementing enzalutamide as a treatment option for patients with castration-sensitive non-metastatic prostate cancer demonstrating biochemical recurrence. Biochemical recurrence of prostate cancer is defined as a rising prostate-specific antigen (PSA) level following curative-intent radical prostatectomy or radiation, without evidence of metastatic disease with conventional

imaging. To be eligible for this treatment protocol, patients must have PSA doubling time of nine months or less, and not be candidates for salvage radiation therapy. Concurrent androgen deprivation therapy (ADT) should be maintained when possible. BC Cancer Compassionate Access Program (CAP) approval is required.

Approval of this treatment program is based on the phase III EMBARK trial.[1,2] Patients with high-risk biochemically recurrent prostate cancer were randomized to one of three arms: enzalutamide and ADT (combination arm), enzalutamide monotherapy, or ADT alone. The primary endpoint of metastasis-free survival was significantly improved in the combination arm as compared to ADT alone. Metastasis-free survival was also significantly improved with enzalutamide monotherapy as compared to ADT alone. Adverse events in the enzalutamide-containing arms were in keeping with previously reported studies of enzalutamide.

Lung

Cemiplimab for First-Line Treatment of Advanced Non-Small Cell Lung Cancer (LUAVCEMF) – The BC Cancer Lung Tumour Group is introducing cemiplimab for the treatment of patients with advanced non-small cell lung cancer (NSCLC) not amenable to curative therapy and who are not candidates for chemotherapy. Patients must have a tumour with high PD-L1 expression [Tumour Proportion Score (TPS) of 50% or greater], and no genomic aberrations such as *EGFR* mutations, *ALK* translocations or *ROS1* fusions. Cemiplimab treatment is continued until disease progression, unacceptable toxicity or a maximum of 108 weeks. For patients with no prior treatment in the advanced setting, cemiplimab represents an additional immunotherapy treatment option to pembrolizumab (LUAVPMBF, LUAVPMBF6).

The randomized, controlled, phase III EMPOWER-Lung 1 trial evaluated cemiplimab monotherapy as compared to investigator's choice of platinum-based doublet chemotherapy for the first-line treatment of patients with advanced NSCLC.[3,4] Eligibility included NSCLC with PD-L1 TPS 50% or greater and no *EGFR*, *ALK* or *ROS1* mutations. Cemiplimab monotherapy demonstrated a statistically significant and clinically meaningful improvement in overall survival and a manageable side effect profile.

Cemiplimab and Platinum-Based Doublet Chemotherapy for First-Line Treatment of Advanced Non-Small Cell Lung Cancer – The BC Cancer Lung Tumour Group is also implementing cemiplimab in combination with platinum-based doublet chemotherapy for the first-line treatment of patients with advanced NSCLC not amenable to curative therapy.

LUAVPCCEM	**Paclitaxel, Carboplatin and Cemiplimab**
LUAVPGCEM	**Platinum, Gemcitabine and Cemiplimab**
LUAVPPCEM	**Platinum, Pemetrexed and Cemiplimab**

These protocols use cemiplimab in combination with platinum-based doublet chemotherapy for six cycles, followed by cemiplimab maintenance to a maximum of 108 weeks. Patients who are not able to receive paclitaxel-carboplatin as the chemotherapy backbone may instead receive platinum-gemcitabine. Platinum-pemetrexed is the preferred backbone for patients with non-squamous tumour cell histology; in this protocol both cemiplimab and pemetrexed are continued as maintenance. Cemiplimab provides another immunotherapy-platinum-based chemotherapy treatment option for patients with no prior treatment in the advanced setting and without *EGFR*, *ALK* or *ROS1* mutations.

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The controlled, double-blind, phase III EMPOWER-Lung 3 trial evaluated cemiplimab in combination with platinum-based doublet chemotherapy in patients with advanced NSCLC not amenable to curative therapy.[5,6] The control group received platinum-based doublet chemotherapy alone. The cemiplimab group showed a statistically significant improvement in overall survival. The safety profile of cemiplimab in combination with platinum-based doublet chemotherapy was manageable and consistent with the known safety profiles of the individual agents.

Skin and Melanoma

Cemiplimab for Locally Advanced Basal Cell Carcinoma (USMLACEM) – The BC Cancer Skin and Melanoma Tumour Group is implementing cemiplimab as second-line treatment for patients with invasive locally advanced basal cell carcinoma (BCC) not amenable to curative-intent surgery or radiation. To be eligible for cemiplimab, patients must have disease progression or treatment intolerance with a first-line hedgehog pathway inhibitor such as vismodegib. BC Cancer Compassionate Access Program (CAP) approval is required.

Treatment program approval is based on the results of the open-label, single-arm, phase II trial of cemiplimab in patients with locally advanced BCC progressing on or intolerant to first-line HHI therapy.[7,8] Patients received cemiplimab for up to 93 weeks or until disease progression or unacceptable toxicity. Cemiplimab exhibited clinically meaningful antitumour activity and an acceptable safety profile.

References:

1. Freedland SJ, de Almeida Luz M, De Giorgi U, et al. Improved outcomes with enzalutamide in biochemically recurrent prostate cancer. *N Engl J Med* 2023;389(16):1453-1465. https://doi.org/10.1056/NEJMoa2303974
2. CADTH Reimbursement Recommendation. Enzalutamide (Xtandi®). 2024.
3. Sezer A, Kilickap S, Gümüş M, et al. Cemiplimab monotherapy for first-line treatment of advanced non-small-cell lung cancer with PD-L1 of at least 50%: a multicentre, open-label, global, phase 3, randomised controlled trial. *Lancet* 2021;397(10274):592-604. https://doi.org/10.1016/S0140-6736(21)00228-2
4. CADTH Reimbursement Recommendation. Cemiplimab (Libtayo®). *Canadian Journal of Health Technologies* 2022;2(6):1-17. https://doi.org/10.51731/cjht.2022.365
5. Gogishvili M, Melkadze T, Makharadze T, et al. Cemiplimab plus chemotherapy versus chemotherapy alone in non-small cell lung cancer: a randomized, controlled, double-blind phase 3 trial. *Nat Med* 2022;28(11):2374-2380. https://doi.org/10.1038/s41591-022-01977-y
6. CADTH Reimbursement Recommendation. Cemiplimab (Libtayo®). *Canadian Journal of Health Technologies* 2024;4(5):1-21. https://doi.org/10.51731/cjht.2024.896
7. Stratigos AJ, Sekulic A, Peris K, et al. Cemiplimab in locally advanced basal cell carcinoma after hedgehog inhibitor therapy: an open-label, multi-centre, single-arm, phase 2 trial. *Lancet Oncol* 2021;22(6):848-857. https://doi.org/10.1016/S1470-2045(21)00126-1
8. CADTH Reimbursement Recommendation. Cemiplimab (Libtayo®). *Canadian Journal of Health Technologies* 2022;2(3).1-17. https://doi.org/10.51731/cjht.2022.288

Expansion of Existing Programs

BC Cancer Provincial Systemic Therapy has approved the expansion of the following treatment programs effective 01 August 2025.

Skin and Melanoma

Nivolumab for Adjuvant Treatment of Resected Melanoma (SMAJNIV, SMAJNIV4) – The BC Cancer Skin and Melanoma Tumour Group is expanding the SMAJNIV/SMAJNIV4 eligibility criteria to include patients with resected stage IIB/C cutaneous melanoma. Treatment includes one year of adjuvant nivolumab monotherapy following complete resection. For this patient population, nivolumab represents an additional adjuvant immunotherapy treatment option to pembrolizumab (SMAJPEM/SMAJPEM6). This expansion is supported by the randomized, double-blind, phase III CheckMate 76K trial comparing adjuvant

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nivolumab with placebo in patients with resected stage IIB/C cutaneous melanoma.[1,2] Nivolumab significantly improved the primary endpoint of recurrence-free survival.

References:
1. Kirkwood JM, Del Vecchio M, Weber J, et al. Adjuvant nivolumab in resected stage IIB/C melanoma: primary results from the randomized, phase 3 CheckMate 76K trial. *Nat Med* 2023;29(11):2835-2843. https://doi.org/10.1038/s41591-023-02583-2
2. CADTH Reimbursement Recommendation. Nivolumab (Opdivo®). *Canadian Journal of Health Technologies* 2024;4(6):1-21. https://doi.org/10.51731/cjht.2024.920

Practice Standards and Policies

All Systemic Therapy policies are on the Shared Health Organizations Portal (SHOP) BC Cancer page.

Updated Policy III-10: Systemic Therapy Treatment Delivery Process

The permitted dose variance for monoclonal antibodies with BSA- and weight-based dosing has been expanded from 5% to 10%. This revision will reduce the need for dose clarification with prescribers for most monoclonal antibodies. Systemic Therapy **Policy III-10: Systemic Therapy Treatment Delivery Process** will be linked to the list of applicable monoclonal antibodies posted on the Cancer Drug Manual© Appendix. All other drugs, including antibody-drug conjugates and bispecific antibodies, will maintain the pre-existing 5% dose variance.

Monoclonal antibodies have a wide dosing range and large interpatient variability in systemic drug exposure (coefficient of variation of AUC of 20%-50%).[1,2] This means that the expanded dose variance is not expected to impact effectiveness or safety of therapy. The new dose variance will be consistent with the recommendations of the Hematology Oncology Pharmacy Association and the National Comprehensive Cancer Network, as well as with practice established in other provincial, national and international jurisdictions.

References:
1. Fahrenbruch R, Kintzel P, Bott AM, Gilmore S, Markham R. Dose rounding of biologic and cytotoxic anticancer agents: a position statement of the Hematology/Oncology Pharmacy Association. *J Oncol Pract* 2018;14(3):e130-e136. https://doi.org/10.1200/JOP.2017.025411
2. Vandyke TH, Athmann PW, Ballmer CM, Kintzel PE. Cost avoidance from dose rounding biologic and cytotoxic antineoplastics. *J Oncol Pharm Pract* 2017;23(5):379-383. https://doi.org/10.1177/1078155216639756

Drug Update

New Zanubrutinib Formulation

Effective 01 August 2025, zanubrutinib (BRUKINSA) will be available as a 160 mg tablet. The tablet and capsule formulations have equivalent bioavailability, are considered interchangeable, and follow the same dosing; one 160 mg tablet replaces two 80 mg capsules. Dose modifications within zanubrutinib-containing protocols (LYCLLZANU, ULYWMZANU) have been updated to reflect availability of the 160 mg tablet. The initial zanubrutinib dose modification now indicates 160 mg once daily as the only option (the 80 mg twice daily option has been removed). Additionally, although zanubrutinib tablets should not be chewed or crushed, patients may be advised to split the tablet if they require further dose reduction to 80 mg once daily. A zanubrutinib patient information letter is available in the Cancer Drug Manual©.

Cancer Drug Manual©

All documents are available in the Cancer Drug Manual© on the BC Cancer website.

Revised Documents

Carmustine Monograph and Chemotherapy Preparation and Stability Chart

Supply and Storage: added two new Marcan formulations (ready-to-use and powder) [NOTE vial concentrations are different from each other and from pre-existing SteriMax brand]
Chemotherapy Preparation and Stability Chart: added two new Marcan formulations (ready-to-use and powder)

Cemiplimab Monograph and Chemotherapy Preparation and Stability Chart

Pharmacokinetics: updated absorption, metabolism and excretion sections
Uses: updated Health Canada-approved indications in primary uses
Cautions: added information about elderly patients in *Special Populations*
Supply and Storage: added Regeneron brand; removed sanofi-aventis
Solution Preparation and Compatibility: added bullet regarding presence of particles in the vial
Chemotherapy Preparation and Stability Chart: added Regeneron brand

Chemotherapy Preparation and Stability Chart

Cabazitaxel: added Formative brand
Cyclophosphamide: added SteriMax brand
Rituximab: added extended stability for RUXIENCE® biosimilar

Erratum

June 2025 Issue

In the ST Update Editor's Choice summary of the newly approved protocol using ipilimumab and nivolumab for the neoadjuvant treatment of stage III melanoma (SMNAIPNI), there was an error in the second paragraph describing the NADINA trial. The summary erroneously stated that patients in the neoadjuvant group with a pathological partial response or nonresponse received adjuvant ipilimumab-nivolumab or dabrafenib-trametinib for up to one year. It should have stated that the patients received adjuvant nivolumab (as monotherapy) or dabrafenib-trametinib.

Benefit Drug List

New Programs

The following treatment programs have been added to the BC Cancer Benefit Drug List effective 01 August 2025:

Protocol Title	Protocol Code	Benefit Status
Therapy for Castration-Sensitive High-Risk Non-Metastatic Prostate Cancer using **Enzalutamide**	**UGUPAJENZ**	Restricted
First-Line Treatment of Advanced Non-Small Cell Lung Cancer using **Cemiplimab**	**LUAVCEMF**	Class I
First-Line Treatment of Advanced Non-Small Cell Lung Cancer with **Paclitaxel**, **Carboplatin** and **Cemiplimab**	**LUAVPCCEM**	Class I
First-Line Treatment of Advanced Non-Small Cell Lung Cancer with **Platinum**, **Gemcitabine** and **Cemiplimab**	**LUAVPGCEM**	Class I
First-Line Treatment of Advanced Non-Small Cell Lung Cancer with **Platinum**, **Pemetrexed** and **Cemiplimab**	**LUAVPPCEM**	Class I
Treatment of Locally Advanced Basal Cell Carcinoma using **Cemiplimab**	**USMLACEM**	Restricted
*Lymphodepletion using **fludarabine** and **cyclophosphamide** prior to CAR-T cell therapy* ✓ New indication added	**LKNOS**	Class I
*Lymphodepletion using **fludarabine** and **cyclophosphamide** prior to CAR-T cell therapy* ✓ New indication added	**LYNOS**	Class I

Revised Programs

The following treatment programs have been revised on the BC Cancer Benefit Drug List effective 01 August 2025:

Protocol Title	Protocol Code	Benefit Status
Treatment of Chronic Lymphocytic Leukemia or Small Lymphocytic Lymphoma using **Zanubrutinib** ✓ **Zanubrutinib tablet** added	**LYCLLZANU**	Class I
Treatment of Waldenström Macroglobulinemia or Lymphoplasmacytic Lymphoma (LPL) using **Zanubrutinib** ✓ **Zanubrutinib tablet** added	**ULYWMZANU**	Restricted
Adjuvant Treatment of Resected Melanoma using **Nivolumab** ✓ Protocol title updated	**SMAJNIV**	Class I
Adjuvant Treatment of Resected Melanoma using **4-Weekly Nivolumab** ✓ Protocol title updated	**SMAJNIV4**	Class I
Adjuvant Treatment of Resected Melanoma using **Pembrolizumab** ✓ Protocol title updated	**SMAJPEM**	Class I
Adjuvant Treatment of Resected Melanoma using **6-Weekly Pembrolizumab** ✓ Protocol title updated	**SMAJPEM6**	Class I

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 (CAP) approval are prefixed with the letter **U.**

NEW Protocols, PPPOs and Patient Handouts *(new documents checked ☑)*

Protocol Code	Protocol Title	Protocol	PPPO	Handout
UGUPAJENZ	Therapy for Castration Sensitive High-Risk Non-Metastatic Prostate Cancer using Enzalutamide	☑	☑	☐
LUAVCEMF	First-Line Treatment of Advanced Non-Small Cell Lung Cancer using Cemiplimab	☑	☑	☐
LUAVPCCEM	First-Line Treatment of Advanced Non-Small Cell Lung Cancer with Paclitaxel, Carboplatin and Cemiplimab	☑	☑	☐
LUAVPGCEM	First-Line Treatment of Advanced Non-Small Cell Lung Cancer with Platinum, Gemcitabine and Cemiplimab	☑	☑	☐
LUAVPPCEM	First-Line Treatment of Advanced Non-Small Cell Lung Cancer with Platinum, Pemetrexed and Cemiplimab	☑	☑	☐
USMLACEM	Treatment of Locally Advanced Basal Cell Carcinoma using Cemiplimab	☑	☑	☐

REVISED Protocols, PPPOs and Patient Handouts *(revisions in respective columns)*

Protocol Code	Protocol Title	Protocol	PPPO	Handout
BR | Breast				
BRAJDC	Neoadjuvant or Adjuvant Therapy for Breast Cancer using Docetaxel and Cyclophosphamide	*Treatment duration updated*	---	*Treatment duration updated*
GU | Genitourinary				
GUMCSPENZ	Treatment for Metastatic Castration-Sensitive Prostate Cancer using Enzalutamide	*Eligibility (potassium level removed), Treatment and Precautions updated*	---	---
UGUNMPDAR	Treatment of Non-Metastatic Castration Resistant Prostate Cancer Using Darolutamide	*Exclusions updated, tests clarified*	--	--
UGUNMPENZ	Therapy for Non-Metastatic Castration-Resistant Prostate Cancer using Enzalutamide	*Caution added; Exclusions, Treatment and Precautions updated*	---	---

REVISED Protocols, PPPOs and Patient Handouts *(revisions in respective columns)*

Protocol Code	Protocol Title	Protocol	PPPO	Handout
UGUPABI	Palliative Therapy for Metastatic Castration-Resistant Prostate Cancer using Abiraterone and Prednisone	*Exclusions and Treatment updated; Cautions and Dose Modifications clarified*	---	---
UGUPAPA	Treatment of Non-Metastatic Castration-Resistant Prostate Cancer using Apalutamide	*Eligibility and Tests clarified; Caution added; Exclusions and Treatment updated*	---	---
UGUPAVNABI	Treatment for Metastatic Castration-Resistant Prostate Cancer using Niraparib-Abiraterone and Prednisone	*Exclusions updated; Caution clarified*	---	---
UGUPAVOABI	Treatment for Metastatic Castration-Resistant Prostate Cancer using Olaparib with Abiraterone and Prednisone	*Exclusions updated; Cautions clarified*	---	---
UGUPENZ	Palliative Therapy for Metastatic Castration-Resistant Prostate Cancer using Enzalutamide	*Tests clarified; Exclusions, Treatment and Precautions updated*	---	---
UGUPLVT	Treatment of Metastatic Castration-Resistant Prostate Cancer using Lutetium (^{177}Lu) Vipivotide Tetraxetan (PLUVICTO)	*Radiation isolation requirements updated*	*Radiation isolation requirements updated*	---
LU | Lung				
LUAVATZ	Treatment of Advanced Non-Small Cell Lung Cancer using Atezolizumab	*Exclusions updated; Tests clarified*	---	---
LUAVATZ4	Treatment of Advanced Non-Small Cell Lung Cancer using 4-Weekly Atezolizumab	*Exclusions and Precautions updated; Tests clarified*	---	---
LUAVNIV	Treatment of Advanced Non-Small Cell Lung Cancer using Nivolumab	*Exclusions and Precautions updated; Tests clarified*	---	---
LUAVNIV4	Treatment of Advanced Non-Small Cell Lung Cancer using 4-Weekly Nivolumab	*Exclusions and Precautions updated; Tests clarified*	---	---
LUAVPC	First-Line Treatment of Advanced Non-Small Cell Lung Cancer (NSCLC) with Carboplatin and Paclitaxel	*Tests clarified (renogram removed)*	---	---
LUAVPCIPNI	First-Line Treatment of Advanced Squamous Non-Small Cell Lung Cancer with Paclitaxel, Carboplatin, Ipilimumab and Nivolumab	*Eligibility, Tests and Precautions updated; Tests clarified (renogram removed)*	---	---

REVISED Protocols, PPPOs and Patient Handouts *(revisions in respective columns)*

Protocol Code	Protocol Title	Protocol	PPPO	Handout
LUAVPCPMB	First-Line Treatment of Advanced Squamous Non-Small Cell Lung Cancer with Paclitaxel, Carboplatin and Pembrolizumab	*Eligibility and Precautions updated; Tests clarified (renogram removed)*	---	---
LUAVPGPMB	First-Line Treatment of Advanced Squamous Non-Small Cell Lung Cancer with Platinum, Gemcitabine and Pembrolizumab	*Eligibility and Precautions updated; Tests clarified (renogram removed)*	---	---
LUAVPMB	Treatment of Advanced Non-Small Cell Lung Cancer using Pembrolizumab	*Exclusions and Precautions updated; Tests clarified*	---	---
LUAVPMB6	Treatment of Advanced Non-Small Cell Lung Cancer using 6-Weekly Pembrolizumab	*Exclusions and Precautions updated; Tests clarified*	---	---
LUAVPMBF	First-Line Treatment of Advanced Non-Small Cell Lung Cancer using Pembrolizumab	*Eligibility and Precautions updated; Exclusions replaced by Cautions; Tests clarified*	---	---
LUAVPMBF6	First-Line Treatment of Advanced Non-Small Cell Lung Cancer using 6-Weekly Pembrolizumab	*Eligibility and Precautions updated; Exclusions replaced by Cautions; Tests clarified*	---	---
LUAVPMBM	Maintenance Therapy of Advanced Non-Small Cell Lung Cancer with Pembrolizumab	*Eligibility and Precautions updated; Exclusions replaced by Cautions; Tests clarified*	---	---
LUAVPMBM6	Maintenance Therapy of Advanced Non-Small Cell Lung Cancer with 6-Weekly Pembrolizumab	*Eligibility and Precautions updated; Exclusions replaced by Cautions; Tests clarified*	---	---
LUAVPPIPNI	First-Line Treatment of Advanced Non-Squamous Non-Small Cell Lung Cancer with Platinum, Pemetrexed, Ipilimumab and Nivolumab	*Eligibility, Tests and Precautions updated*	---	---
LUAVPPMBM	Maintenance Therapy of Advanced Non-Squamous Non-Small Cell Lung Cancer with Pemetrexed and Pembrolizumab	*Eligibility and Precautions updated; Exclusions replaced by Cautions; Tests clarified; nadir tests and nadir dose modification table removed; formatting*	*Tests clarified (removed weekly CBC & Diff during cycles 1 and 2)*	---
LUAVPPPMB	First-Line Treatment of Advanced Non-Squamous Non-Small Cell Lung Cancer with Platinum, Pemetrexed and Pembrolizumab	*Eligibility and Precautions updated; Tests clarified*	---	---

REVISED Protocols, PPPOs and Patient Handouts *(revisions in respective columns)*

Protocol Code	Protocol Title	Protocol	PPPO	Handout
LULACATRT	Treatment of Locally Advanced Non-Small Cell Lung Cancer using Carboplatin and Paclitaxel with Radiation Therapy	*Optional consolidation treatment and related premeds removed*	*Premedications, treatment, return appointment orders updated*	--
LY | Lymphoma				
LYCLLZANU	Treatment of Chronic Lymphocytic Leukemia or Small Lymphocytic Lymphoma using Zanubrutinib	*Tests clarified; 80 mg twice daily dose option removed*	*Treatment name and Tests clarified; 80 mg twice daily dose option removed*	---
ULYWMZANU	Treatment of Waldenström Macroglobulinemia or Lymphoplasmacytic Lymphoma (LPL) using Zanubrutinib	*80 mg twice daily dose option removed*	*Treatment name and Tests clarified; 80 mg twice daily dose option removed*	*Dosage form updated*
MY | Myeloma				
UMYTEC	Treatment of Relapsed and Refractory Multiple Myeloma using Teclistamab	*Tests updated; Monitoring clarified*	*Tests updated*	---
SC | Supportive Care				
SCCRS	Cytokine Release Syndrome Management	*Preamble, Tests and Treatment tables updated*	*Indications for PRN orders added; ferritin added; Grade 2 and Grade 3/4 sections clarified*	---
SM | Skin and Melanoma				
SMAJNIV	Adjuvant Treatment of Resected ~~Stage III-IV NED~~ Melanoma using Nivolumab	*Title, Eligibility, Tests, Precautions and References updated*	---	---
SMAJNIV4	Adjuvant Treatment of Resected ~~Stage III-IV NED~~ Melanoma using 4-Weekly Nivolumab	*Title, Eligibility, Tests, Precautions and References updated*	---	---
SMAJPEM	Adjuvant Treatment of Resected ~~Stage IIB to IV NED~~ Melanoma using Pembrolizumab	*Title, Eligibility and Precautions updated*	---	---
SMAJPEM6	Adjuvant Treatment of Resected ~~Stage IIB to IV NED~~ Melanoma using 6-Weekly Pembrolizumab	*Title, Eligibility and Precautions updated; Tests clarified*	---	---
SMAVCEM	Treatment of Locally Advanced or Metastatic Cutaneous Squamous Cell Carcinoma using Cemiplimab	*Cautions, Tests, Treatment and Precautions updated*	*Height, weight and BSA deleted; Tests clarified*	---

Resources and Contact Information

Resource	Phone	Email / Toll Free / Fax
Systemic Therapy Update: www.bccancer.bc.ca/health-professionals/clinical-resources/systemic-therapy/systemic-therapy-update		
Systemic Therapy Update Editor	604-877-6000 x 672649	bulletin@bccancer.bc.ca
Oncology Drug Information Cancer Drug Manual Editor Pharmacy Oncology Certification	604-877-6275 250-519-5500 x 693742 250-712-3900 x 686820	druginfo@bccancer.bc.ca nbadry@bccancer.bc.ca rxchemocert@bccancer.bc.ca
CAP – Compassionate Access Program	604-877-6277	cap_bcca@bccancer.bc.ca fax 604-708-2026
OSCAR – Online System for Cancer Drugs Adjudication and Reimbursement	888-355-0355	oscar@bccancer.bc.ca fax 604-708-2051
Library/Cancer Information	604-675-8003	toll free 888-675-8001 x 8003 requests@bccancer.bc.ca
Library Document Delivery	604-675-8002	requests@bccancer.bc.ca
Pharmacy Professional Practice Professional Practice, Nursing Provincial Systemic Therapy Network	604-877-6000 x 672247 604-877-6000 x 672623 604-877-6000 x 672247	mlin@bccancer.bc.ca BCCancerPPNAdmin@phsa.ca ProvincialSystemicOffice@bccancer.bc.ca
BC Cancer – Abbotsford BC Cancer – Kelowna BC Cancer – Prince George BC Cancer – Surrey BC Cancer – Vancouver BC Cancer – Victoria	604-851-4710 250-712-3900 250-645-7300 604-930-2098 604-877-6000 250-519-5500	toll free 877-547-3777 toll free 888-563-7773 toll free 855-775-7300 toll free 800-523-2885 toll free 800-663-3333 toll free 800-670-3322
Community Oncology Network (CON) sites: To update your contact information, please contact: bulletin@bccancer.bc.ca		

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