



Systemic Therapy Update

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FAX request form and IN TOUCH phone list are provided if additional information is needed.

BENEFIT DRUG LIST

The current Benefit Drug List and Class II forms are available on the website www.bccancer.bc.ca.

PROTOCOL UPDATE

Protocols by Drugs Index A cross-referenced index lists the BC Cancer Agency benefit drugs with their corresponding protocols. This index can be obtained via H-drive at regional cancer centres or Fax-back as listed at the end of the Update.

Protocol codes for treatments requiring “Undesignated Indication” approval prior to use are prefixed with the letter **U**.

- **INDEX to BC Cancer Agency Protocol Summaries** revised monthly (includes tumour group, protocol code, indication, drugs, last revision date and version)

- **GUBCV** revised (clarification of CBC in Tests, contact physician changed): Therapy for transitional cell cancers using carboplatin-vinblastine
- **GUBPV** deleted: Therapy for transitional cell cancers using cisplatin-vinblastine
- **GUCMV** deleted: Therapy for transitional cell bladder cancers using cisplatin, methotrexate and vinblastine
- **UGUGEMCIS** revised (renal clearance added to eligibility and dose modifications): Palliative therapy for urothelial carcinoma using cisplatin and gemcitabine
- **GUPM** revised (eligibility): Therapy for hormone-resistant metastatic carcinoma of the prostate using mitomycin monotherapy
- **GUPMX** revised (eligibility): Palliative therapy for hormone refractory prostate cancer using mitoxantrone and prednisone
- **LYABVD** revised (dose reductions added for patients on NCIC CTG HD 7 protocol): Treatment of Hodgkin’s disease with doxorubicin, bleomycin, vinblastine, and dacarbazine
- **LYCVP** revised (ANC changed in Dose Modifications): Advanced indolent lymphoma using cyclophosphamide, vincristine, prednisone
- **SCPAINSU** new: Incident pain therapy using sufentanil via sublingual route

Protocols are available on the BC Cancer Agency website www.bccancer.bc.ca/ccp/.

CANCER MANAGEMENT MANUAL

The Cancer Management Manual is available on BC Cancer Agency website www.bccancer.bc.ca/cmm/.

PRE-PRINTED ORDER UPDATE

Pre-printed orders should always be checked with the most current BC Cancer Agency protocol summaries. The BC Cancer Agency Vancouver Centre has prepared chemotherapy pre-printed orders, which can be used as a guide for reference. An index to the orders can be obtained by Fax-back.

FOCUS ON

Financial Aids for Cancer Patients The **Emergency Aid program** for symptom control medications and the **BC Palliative Care Benefit program** are the two programs that may provide financial aid to cancer patients.

The **Emergency Aid (EA) program** is a joint partnership between the BC Cancer Agency (BCCA) and the Canadian Cancer Society (CCS), BC and Yukon division. This program was established in 1999 to assist cancer patients with the cost of symptom management medications. CCS determines the patient's financial eligibility. BCCA provides funding and identifies eligible medications.

To be eligible for this program, patients must be:

- registered with a cancer diagnosis with the BC Cancer Registry
- under 65 years of age
- not receiving support from Pharmacare
- not receiving other government health support (e.g. Veteran Affairs, First Nation Bands, Department of Social Development and Economic Security or other insurance sources)

CCS will review the eligibility and financial status to determine if the patient qualifies for aid from this program. Individual hospital's patient and family counselling department can act as a liaison and contact CCS on behalf of the patient. Once a patient has been accepted into the program:

- a letter of notification is sent to the pharmacy of the patient's choice and to the BCCA-EA office
- patients take their prescriptions to the designated pharmacy, and pay only the pre-determined proportion
- only medications listed on the approved BCCA symptom control medications list will be covered

- reimbursement is made to the dispensing community pharmacy; there is no direct reimbursement to the patient and no retroactive payment.
- coverage is given for a one-year period, after which the patient must be reassessed.

The **BC Palliative Care Benefits Program** is funded and administered by the Regional Programs Division of the Ministry of Health. Established in February 2001, this program supports and enables individuals in the end-stage of any life-threatening illness or disease to remain at home by covering the cost of medication, medical supplies and equipment — all at no charge to the patient.

To be eligible, patients must be:

- BC residents covered under the Medical Service Plan
- diagnosed with a life-threatening disease or illness with a life expectancy of up to six months

Palliative Care Benefits coverage continues as long as the patient is diagnosed as requiring palliative care. The patient's physician must certify that the individual meets the criteria for Palliative Care Benefits coverage, therefore the physician is responsible for registering eligible individuals.

For coverage of medication costs, the physician submits an application form directly to Pharmacare. Once the application is processed and information has been entered into the PharmaNet system, the patient's prescription can be filled at their local community pharmacy. Only medications listed in the current **BC Palliative Care Drug Formulary** are covered. These include medications prescribed for pain and symptom control, medications to improve quality of life and selected over-the-counter (OTC) medications that may be required to supplement the prescription drugs. A prescription is required for the OTC drugs to ensure payment through PharmaNet. The plan does not cover vitamins, herbals, nutritional supplements, or medical marijuana.

For coverage of medical supplies and equipment, the physician must send a copy of the application form to the local health authority. A home care nurse or a nurse from the palliative care program will then contact the patient and arrange for a home visit to determine which medical supplies and equipment are needed. Eligible medical supplies and equipment are listed in the BC Palliative Care

Benefits package. These do not include ongoing diabetic supplies or ostomy supplies, which are already covered by Pharmacare.

For more information on the Emergency Aid program, you can contact:

- regional Canadian Cancer Society office in your community or call the Cancer Information Service line 1-888-939-3333
- Francis Hu, CON pharmacist, BC Cancer Agency, 1-800-663-3333 local 2515.

For more information on the BC Palliative Care Benefits Program, you can contact:

- BC Ministry of Health Information line 1-800-465-4911 or (250) 952-1742.

Dawn Annable
Pharmacy CON Educator
BC Cancer Agency-Fraser Valley Centre

CANCER DRUG MANUAL

The Cancer Drug Manual is available on the BC Cancer Agency website www.bccancer.bc.ca/cdm/.

SUPPORTIVE CARE

Sufentanil for Incident Pain Incident pain or pain with movement in palliative care patients has a rapid onset and is often intense but transient in nature. The onset and duration of action of oral analgesics are usually too slow and long lasting for the management of incident pain, leading to inadequate pain control and unwanted adverse effects.

Sufentanil belongs to a class of fentanyl-related opioids which are better absorbed sublingually than morphine. Sublingual administration of sufentanil has the advantage of rapid absorption and increased bioavailability. Compared to fentanyl, sufentanil is nearly ten times more potent per volume and can be given sublingually in volumes of less than 1 mL. The onset of action is about 3 to 5 minutes and the duration of analgesia may last for 10-25 minutes.

The usual dose is 25 mcg (0.5 mL) every 5 minutes as needed, up to three doses per episode of pain. Patients should be monitored for sedation, increase or decrease in blood pressure and respiratory depression. See the SCPAINSU protocol for more details on the dosing regimen and monitoring parameters.

PROVINCIAL SYSTEMIC THERAPY PROGRAM POLICIES

BC Cancer Agency Systemic Therapy Policies are available at h:\everyone\systemic\prov\chemo\policies on the H-drive at the regional cancer centres and on www.bccancer.bc.ca/ccp/appendices.shtml in the BC Cancer Agency website.

COMMUNITIES ONCOLOGY NETWORK

Retirement of CON Vice President Dr. Jack Chritchley retires from his position of Vice President of the Communities Oncology Network (CON) of the BC Cancer Agency at the end of March 2002. Jack is well known to all of us and greatly respected for his commitment to the development of a high quality, easily accessible community cancer program.

Jack obtained his MD at the University of Western Ontario in 1965 and his Masters of Science in Pathology at the University of Alberta in 1969. He completed his Internal Medicine specialty training at the University of Alberta in 1970 and became a fellow of the Royal College of Physicians and Surgeons of Canada that year. Jack then developed the Oncology Clinic at Penticton Regional Hospital and was its Director from 1974 until he joined the BC Cancer Agency in March 1996. He has had a distinguished record as Chairman of the Board of Trustees at the BC Cancer Agency from 1989-1991, President for the North Pacific Society of Internal Medicine in 1992, Chairman of the Cancer Committee of the BC Medical Association from 1982-1992 and Vice President of Communities Oncology Network at the BC Cancer Agency from March 1996-March 2002.

Jack has fostered the development of regional cancer centers and collaborated closely with physicians and medical oncologists throughout the province and with the Provincial Systemic Therapy Program at the BC Cancer Agency. He has been instrumental in establishing excellent educational programs for physicians, nurses and pharmacists and had an outstandingly successful BC Cancer Agency Annual Cancer Conference in November 2001 that integrated scientists, physicians, nurses and pharmacists and hospital administrators in an excellent meeting in Vancouver.

Although Dr. Chritchley has retired from his community oncology role, he will return on a part-

time basis to further develop educational programs for the BC Cancer Agency.

We want to wish Jack well in his new life and we hope he will have every opportunity to enjoy his recreational activities as well as his renewed commitment to education.

Susan O'Reilly, MB FRCPC
Provincial Systemic Program Leader

The interim contacts for CON related issues are: Jaya Venkatesh, Business Affairs Coordinator, Provincial Systemic Therapy Program at 1-800-663-3333 local 2732 or Dorothy Gifford, CON Secretary 1-800-663-3333 local 2744.

WEBSITE UPDATE

Improved Website Access As part of an ongoing Extranet project, the BC Cancer Agency website is being enhanced with the new Microsoft Content Management Server. This will allow faster access to the information posted on the website, including the Cancer Management Manual, Cancer Chemotherapy Protocols, and the Cancer Drug Manual, and patient information.

LIBRARY/CANCER INFORMATION CENTRE

Unconventional Cancer Therapies Manual is available on the BC Cancer Agency website www.bccancer.bc.ca/uct/. The manual consists of 46 short monographs on the more commonly used unconventional cancer therapies (e.g., Essiac, vitamins, teas, shark cartilage) and includes tips for the patient and family on how unconventional therapies can be evaluated. For each therapy the manual provides proponent/advocate claims, as well as evidence-based evaluation/critique quotations from the literature.

CONTINUING EDUCATION

The American Society of Clinical Oncology (ASCO) 38th Annual Meeting will be held in

Orlando, Florida, on May 18-21, 2002. Information can be found on the ASCO website at www.ASCO.org.

International Society of Oncology Pharmacy Practitioners (ISOPP) VIII Symposium will be held on 7-11 May, 2002, at the Fairmont Hotel (Vancouver) in Vancouver, BC. The conference has a wide ranging program for the oncology pharmacist, from setting up a chemotherapy service to pharmacogenomics, drug and disease updates, molecular biology, advances in safe handling of antineoplastics, and symptom management issues.

The keynote speaker will be Dr. David Suzuki, internationally renowned television personality, geneticist, and environmental activist. Other speakers include Howard Pai, Dianne Kapy, Kimberly Kuik, Robin O'Brien, Lynne Nakashima, and Suzanne Taylor of the BC Cancer Agency Systemic Therapy Program, and Dana Cole of the Prince George Regional Hospital.

For more information, visit the conference website at www.isopp.org, or contact Jeff Barnett at jbarnett@bccancer.bc.ca or (250) 519-5519.

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FAX (604) 877-0585

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