



# 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 following new program has been funded by the Provincial Systemic Therapy Program effective:

- L-asparaginase (PEG asparaginase, pegaspargase) for pediatric patients with acute lymphoblastic leukemia treated on the COG-1991 study

This drug is now approved as a Class II drug on the benefit list. A Class II form must be completed and

submitted to the Provincial Systemic Therapy Program before the drug will be dispensed at a regional cancer centre or reimbursed to a community hospital.

Susan O'Reilly, MB, FRCPC  
Provincial Systemic Program Leader

## NEW LYMPHOMA TREATMENT GUIDELINES

Recently the BCCA Lymphoma Tumor Group reviewed the results of its treatment policies for diffuse large B-cell lymphoma (DLBC) for the past 20 years. This extensive review showed that the current protocols (LYACOP6, LYACOP12, LYCOPA) appear to be as effective as but offer no sufficiently compelling advantages over the international standard, CHOP, to justify their continuing use instead of CHOP. On the other hand, the ability to cooperate in international and national research efforts will be definitely enhanced by shifting to the CHOP regimen.

For these and other reasons including cost savings, the Lymphoma Tumor Group has decided to make the following changes as of 1 August 2000 for patients with DLBC:

Patient group	Current protocol	New protocol
Stage IA or IIA, low bulk	LYACOP6 + RT	LYCHOP x 3 cycles + RT
Stage III or IV, or B symptoms or bulky disease, age < 70	LYACOP12	LYCHOP x 6-8 cycles
Stage III or IV, or B symptoms or bulky disease, age > 70	LYCOPA	LYCHOP x 6-8 cycles
Advanced stage + adverse prognostic factors	LYACOP + LYECV	LYCHOP x 6-8 cycles
Relapsed disease with plan for high dose chemo + stem cell transplant	Cyclophosphamide	LYICE

Joe Connors, MD  
Chair, BCCA Lymphoma Tumour Group

## PROTOCOL UPDATE

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

- **INDEX to BCCA Protocol Summaries** revised monthly (includes tumour group, protocol code, indication, drugs, last revision date and version)
- **BRAVTRAP** revised (warfarin interaction added) Therapy for metastatic breast cancer using trastuzumab and paclitaxel
- **UBRAVTR** revised (warfarin interaction added) Therapy for metastatic breast cancer using trastuzumab
- **GOEP** revised (typo corrected under Tests): Therapy of dysgerminomatous ovarian germ cell cancer using cisplatin and etoposide
- **GOOVCARB** revised (typo corrected under Tests): First or second line therapy for invasive epithelial ovarian cancer using single-agent carboplatin
- **LYACOP6** deleted (replaced by LYCHOP for new patients): Treatment of lymphoma with doxorubicin, cyclophosphamide, vincristine and prednisone for 6 weeks. If a patient has already been started on LYACOP6, LYACOP12 or LYCOPA, it will be at the doctor's discretion as to whether or not to switch to CHOP or complete the current treatment.
- **LYACOP12** deleted (replaced by LYCHOP for new patients): Treatment of lymphoma with doxorubicin, cyclophosphamide, vincristine and prednisone. If a patient has already been started on LYACOP6, LYACOP12 or LYCOPA, it will be at the doctor's discretion as to whether or not to switch to LYCHOP or complete the current treatment.
- **LYCHLOR** reformatted: Therapy for low grade lymphoma and chronic lymphocytic leukemia using chlorambucil
- **LYCHOP** new (replacing LYACOP6, LYACOP12, and LYCOPA): Treatment of lymphoma with doxorubicin, cyclophosphamide, vincristine and prednisone (CHOP).
- **LYCOPA** deleted (replaced by LYCHOP for new patients): Treatment of lymphoma with

doxorubicin, vincristine and cyclophosphamide. If a patient has already been started on LYACOP6, LYACOP12 or LYCOPA, it will be at the doctor's discretion as to whether or not to switch to CHOP or complete the current treatment.

- **LYCYCLO** reformatted: Therapy of lymphoma, Hodgkin's disease, chronic lymphocytic leukemia or multiple myeloma using cyclophosphamide
- **LYHDMTX** deleted (replaced by LYHDMTXP and LYHDMTXR): Treatment of leptomeningeal lymphoma or recurrent intracerebral lymphoma with high dose methotrexate
- **LYHDMTXP** new (replacing LYHDMTX): Treatment of primary intracerebral lymphoma with high dose methotrexate
- **LYHDMTXR** new (replacing LYHDMTX): Treatment of leptomeningeal lymphoma or recurrent intracerebral lymphoma with high dose methotrexate
- **LYICE** new: Treatment of lymphoma with ifosfamide, carboplatin and etoposide
- **OSHDMTX** revised (Bleyer diagram added): Treatment of osteosarcoma using high dose methotrexate with leucovorin rescue

## PRE-PRINTED ORDER UPDATE

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Pre-printed orders should always be checked with the most current BCCA protocol summaries. The Vancouver Cancer Centre has prepared the following chemotherapy pre-printed orders, which can be used as a guide for reference:

- **GIENDO2** new: Palliative therapy for pancreatic endocrine tumours using streptozocin and doxorubicin
- **GOCXRADC** revised (pre-printed orders titled GOCXRADC Pretreatment and GOCXRADC): Treatment of high risk squamous cell carcinoma of cervix with concurrent cisplatin and radiation
- **HNFUA** new: Therapy for initial treatment for advanced head and neck cancer using split course radiation therapy combined with mitomycin C and fluorouracil
- **LYECV** new: Etoposide and cyclophosphamide consolidation for lymphoma

An index to the orders can be obtained by Fax-back.

## PATIENT EDUCATION

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**Temozolomide handout** is now available. This is a new benefit drug used for recurrent malignant gliomas.

**Trastuzumab (Herceptin®) handout** has been revised to include interaction with warfarin (see below). Guidelines regarding additional monitoring of warfarin have also been added to the BCCA protocols for trastuzumab (see BRAVTRAP and UBRAVTR in Protocol Update).

**Warfarin handout** has been revised to include two new drug interactions: St John's Wort and trastuzumab (Herceptin®). St. John's Wort is an herbal product commonly used for depression, while trastuzumab is a monoclonal antibody used in breast cancer. Guidelines regarding additional monitoring of warfarin have also been added to the BCCA protocols for trastuzumab (see BRAVTRAP and UBRAVTR in Protocol Update).

## DRUG UPDATE

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### **Alteplase (r-tPA) and Streptokinase for Occluded Central Venous Catheters**

Alteplase (r-tPA) is now the standard fibrinolytic agent for clearing occluded catheters at the BCCA regional cancer centres. This change will be in line with the practice in many Canadian tertiary care centres, Vancouver Hospital and Health Sciences Centre, and BCCA host hospitals. Literature evidence for the use of alteplase for this indication exists. Other fibrinolytic agents, such as urokinase and streptokinase, have also been used to clear occluded venous catheters. However, urokinase became unavailable due to potential viral contamination, while streptokinase carries a very small risk of hypersensitivity reactions and anaphylaxis with repeated exposure.

Pre-filled syringes containing 1mg/mL alteplase solution are manufactured in bulk, frozen, and stored -20°C for up to 6 months. This aliquotting and freezing of alteplase syringes is necessary if alteplase is to be cost-effective. The recommended dosing and administration are:

- use 2 mg/2 mL solution to fill internal volume of occluded catheter + 0.2 mL (e.g., if lumen volume is 1.2mL, instil 1.4mL into lumen)
- Instil x 1 hour; may repeat x 1. (extra 0.2 mL to ensure alteplase reaches catheter tip where a fibrin sheath may exist)
- for calculated volumes greater than 2 mL, fill syringe to appropriate volume with normal saline

New Pharmacy and Nursing procedures on the logistics of preparation, freezing and using alteplase before its expiry will be implemented at the BCCA Cancer Centres in August 2000.

Suzanne Taylor, BScPharm, PharmD, BCPS  
BCCA Pharmacoeconomics/Clinical Pharmacist

## CANCER DRUG MANUAL

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**Cancer Drug Manual Revision** The Cancer Drug Manual is currently being revised for the 3<sup>rd</sup> edition. It is anticipated that over 20 new cancer drugs will be included in the new edition. We would appreciate your comments on how to improve on the contents and formats of the Cancer Drug Manual.

For more information on the Cancer Drug Manual revision, contact Mário de Lemos, Editor, Cancer Drug Manual, at tel: (604) 877-6098 ext 2288, fax: (604) 708-2024, or e-mail: mdelemos@bccancer.bc.ca.

## NURSING PRACTICE TIPS

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The BCCA Nursing has changed the following policies. Request for further information on any of these changes can be made to the Regional Professional Practice Leader of Nursing at the BCCA Cancer Centre within your region.

**1. Care of Central Venous Catheters** A review of the literature has resulted in the following changes to the policies that guide the care and maintenance of all central lines:

- PICC Insertion – implementation of a two-step method of insertion
- PICC Care – updated “trouble-shooting guide for nurses” which provides more direction in the management of phlebitis and skin irritation

- Use of only 10 mL or larger syringes for IV push medications
- Dressings – use of semi-occlusive dressings
- Unblocking catheters – use of alteplase (tPA) instead of streptokinase

**2. Double-Checking of Ambulatory Chemotherapy Infusion Pumps** To increase the safety of patients going home with mechanical infusion pumps containing chemotherapy agents, two chemotherapy-certified registered nurses should double check the programming of the pumps and sign that the check has been done.

**3. Care of Malignant Wound and Radiation Skin Reaction** The practice guidelines in both of these areas are currently under revision and near completion.

Linda Yearwood, MSN  
BCCA Regional Professional Practice Nursing Leader

#### **LIBRARY/CANCER INFORMATION CENTRE**

##### **Unconventional Cancer Therapies Manual**

The new 3<sup>rd</sup> edition (2000) of the Unconventional Cancer Therapies Manual for patients is now available for purchase for \$35 from the BCCA Library/Cancer Information Centre (see phone listing at the end of the Update), or may be consulted at BCCA website: <http://www.bccancer.bc.ca/uct/>

The manual consists of 46 short monographs on the more popular alternative cancer therapies, and includes tips for the patient and family on how alternative therapies can be evaluated. For each therapy (e.g., Essiac, vitamins, teas, shark cartilage, etc.), the manual provides proponent/advocate claims, balanced by evidence-based professional evaluation/critique quotations from the literature.

Photocopying from the manual's binder-formatted print version, or downloading monographs as needed from the BCCA website, is encouraged for cancer patients and families.

David Noble, BSc, BSL  
BCCA Library/Cancer Information Centre Leader

#### **CONTINUING EDUCATION**

**Partnerships in Cancer Care 2000** will take place on Thursday, 23 November, 2000 at the Sheraton Wall Centre in Vancouver. This year's theme will be "*Strategic Planning for Community Cancer Services-the Long Term View*". Agency and community breakout groups will participate in strategic planning for the provincial cancer services. Information Technology, Human Resource Planning, Professional Education/Training and Who does What, Where? will be the focus group topics. Participants will be invited from twenty BCCA Community Cancer Centres.

The Partnership meeting will be coupled to the **BCCA Annual Clinical Cancer Conference** Friday and Saturday the 24 and 25 November. Friday morning will feature separate sessions for the provincial oncology nurses, pharmacists and physician oncologists. Friday afternoon and all day Saturday is devoted to breast, prostate and diagnostic services tumour group presentations. Theatre Sports will entertain at the Friday night banquet.

#### **ERRATUM**

**Protocol Update July 2000** The new protocol for the primary treatment of advanced/recurrent non-small cell cancer of the cervix with carboplatin and paclitaxel in ambulatory care settings should have been UGOCXCAT, and not UGOOVXCAT.

#### **Editorial Review Board**

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Cancer Centre for the Southern Interior (CCSI)	(250) 712-3900	Toll-Free 1-(888)-563-7773
Fraser Valley Cancer Centre (FVCC)	(604)-930-2098	
Vancouver Cancer Centre (VCC)	(604)-877-6000	Toll-Free 1-(800)-663-3333
Vancouver Island Cancer Centre (VICC)	(250) 370-8228	Toll-Free 1-(800)-670-3322

## RADIATION CANCER CENTRE ACCESS

BULLETIN UPDATES	LOCATION
Patient Handouts:	H:\everyone\systemic\chemo\Pt_Educ
	<a href="#">Temozolomide</a>
	<a href="#">Trastuzumab</a>
	<a href="#">Warfarin</a>
Pre-Printed Orders	H:\everyone\systemic\chemo\Orders\VCC
Index of Pre-Printed Orders	H:\everyone\systemic\chemo\Orders\VCC\ <a href="#">Index.doc</a>
	<a href="#">GIENDO2</a>
	<a href="#">GOCXRADC</a>
	<a href="#">HNFUA</a>
	<a href="#">LYECV</a>
Protocol Summaries	H:\everyone\systemic\chemo\Protocol\tumour site"
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	<a href="#">UBRAVTR</a>
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	<a href="#">LYCHOP</a>
	<a href="#">LYCYCLO</a>
	<a href="#">LYHDMTXP</a>
	<a href="#">LYHDMTXR</a>
	<a href="#">LYICE</a>
	<a href="#">OSHDMTX</a>
Index of Protocol Summaries	H:\everyone\systemic\chemo\Protocol\Index\ <a href="#">Index_NT</a> or <a href="#">Index_W6</a>
Reimbursement	H:\everyone\systemic\chemo\Reimburs
Benefit Drug List	<a href="#">BenefitList.doc</a>
Class 2 Form	<a href="#">Class2.doc</a>

For easy access, double-click your systemic chemo icon.

We appreciate your comments. Write us at [bulletin@bccancer.bc.ca](mailto:bulletin@bccancer.bc.ca)

## BCCA SYSTEMIC THERAPY UPDATE FAX REQUEST FORM

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<input type="checkbox"/> GOOVCARB	<input type="checkbox"/> LYICE
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<input type="checkbox"/> LYCHOP	<input type="checkbox"/> Index: Protocol Summaries (current month)
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