



# Systemic Therapy Update

Volume 6, Number 3

for health professionals who care for cancer patients  
Available on website [www.bccancer.bc.ca](http://www.bccancer.bc.ca)

March 2003

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

## ANNUAL INDEX

The 2002 annual index to the Systemic Therapy Update is now available on the BCCA website ([www.bccancer.bc.ca](http://www.bccancer.bc.ca)) under Health Professionals, Chemotherapy Protocols, Update Newsletter.

## HIGHLIGHTS OF PROTOCOL CHANGES

**BRAVDOC7** (palliative weekly docetaxel for breast cancer) has been revised to reduce the dexamethasone premedication from three doses of 8 mg to a single 8 mg dose as well as add a precaution about excessive lacrimation. The change in the dexamethasone premedication is based on recent evidence which showed that low dose dexamethasone may be sufficient to prevent hypersensitivity reactions associated with the weekly, low dose (35 mg/m<sup>2</sup>) docetaxel regimen.

## BENEFIT DRUG LIST

The **temozolomide** indications for recurrent malignant gliomas and low grade oligodendrogliomas have been clarified on the

benefit drug list and the class II form to be consistent with the existing eligibility criteria in the protocol summary CNTEMOZ. The revised indications no longer specify whether temozolomide is to be used as first or second line therapy.

Temozolomide is 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. The current Benefit Drug List, Class II forms and Undesignated Indication Application forms are available on the BC Cancer Agency website ([www.bccancer.bc.ca](http://www.bccancer.bc.ca)) under Health Professionals Info, Chemotherapy Protocols, Frequently Used Forms.

## LIST OF NEW AND REVISED PROTOCOLS

**INDEX to BC Cancer Agency Protocol Summaries** revised monthly (includes tumour group, protocol code, indication, drugs, last revision date and version). Protocol codes for treatments requiring “Undesignated Indication” approval prior to use are prefixed with the letter U.

- **BRAVDOC7** revised (dexamethasone premedication dose reduced, lacrimation precaution added) Palliative therapy for metastatic breast cancer using weekly docetaxel.
- **LYFLU** revised (fludarabine preparation volume changed): Treatment of low grade lymphoma or chronic lymphocytic leukemia with fludarabine.

Protocols are available on the BC Cancer Agency website ([www.bccancer.bc.ca](http://www.bccancer.bc.ca)) under Health Professionals Info, Chemotherapy Protocols.

## CANCER MANAGEMENT MANUAL

The Cancer Management Manual is available on the BC Cancer Agency website ([www.bccancer.bc.ca](http://www.bccancer.bc.ca))

under Health Professionals Info, Cancer Management Guidelines.

### 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.

- **BMTMM03-01** new: Conditioning therapy for autologous stem cell transplant using high dose melphalan in the treatment of multiple myeloma.
- **BRAJFEC** new: Adjuvant therapy for breast cancer using fluorouracil, epirubicin and cyclophosphamide.
- **GIFOLFIRI** revised (loperamide standing order): Palliative combination chemotherapy for metastatic colorectal cancer using irinotecan, fluorouracil and folinic acid (leucovorin).
- **GIFUR3** new: Combined modality adjuvant therapy for high risk rectal carcinoma using fluorouracil, folinic acid (leucovorin) and radiation therapy.
- **GOCXRADC revised (potassium chloride dose in hydration fluid and cisplatin solution)**: Treatment of high risk squamous cell carcinoma of cervix with concurrent cisplatin and radiation
- **LYFLU** new: Treatment of low grade lymphoma or chronic lymphocytic leukemia with fludarabine.

### PATIENT EDUCATION

Patient information handouts for cancer drugs are available on the BC Cancer Agency website ([www.bccancer.bc.ca](http://www.bccancer.bc.ca)) under Health Professionals Info, Drug Database, Drug Information for the Patient.

Patient information handouts for treatment protocols are available on the BC Cancer Agency website ([www.bccancer.bc.ca](http://www.bccancer.bc.ca)) under Health Professionals Info, Chemotherapy Protocols, Information for the Patient.

### CANCER DRUG MANUAL

The Cancer Drug Manual is available on the BC Cancer Agency website [www.bccancer.bc.ca/cdm/](http://www.bccancer.bc.ca/cdm/).

Patient information handouts for cancer drugs are available on the BC Cancer Agency website

([www.bccancer.bc.ca](http://www.bccancer.bc.ca)) under Health Professionals Info, Drug Database, Drug Index (Patient).

### PROVINCIAL SYSTEMIC THERAPY PROGRAM POLICIES

BC Cancer Agency Systemic Therapy Policies are available on the BC Cancer Agency website ([www.bccancer.bc.ca](http://www.bccancer.bc.ca)) under Health Professionals Info, Chemotherapy Protocols, Policies and Procedures.

### NURSING UPDATE: FREQUENTLY ASKED QUESTIONS

**“Is it essential to use an extension tubing with a central line?”**

#### Answer:

For most central venous catheters (CVCs) it is standard practice to have some type of extension set attached to the line. This is done to avoid two major complications: infection and air embolism.

#### 1. Infection

Adding an extension tubing to the line ensures that all procedures are performed at a distance from the hub/entrance site. The extension set also reduces the need to manipulate the catheter. This manipulation can potentially cause local irritation and small abrasions that could be a portal for bacteria to enter the blood stream.

The highest risk area is at the hub of the device. The catheter hub needs to be covered by a sterile occlusive dressing as it is the part of the catheter that is most susceptible to contamination if left exposed to the environment. If you do not use an extension tubing, you will have to remove the dressing each time you need to access the line. The dressing must cover both the catheter hub and the point where it connects with the extension tubing and needs to be changed each time you manipulate it. It is NOT acceptable to simply peel back a dressing and then attempt to reapply it after performing a procedure.

An example of why the extension tube is important can be illustrate with the protocol GIFUC which involves cisplatin and 48-hour continuous IV infusion of fluorouracil. If we did not use extension sets for these patients, then each week they would have two dressing changes within 48 hours of each other. (In fact, three changes if one also uses the line for bloodwork!). Use of extension tubing would greatly reduce the significant impact on nursing time.

It is recommended that all care at the hub of the PICC be performed using sterile technique. Using an extension tubing makes it easier to handle the catheter with less risk of contamination.

## 2. Air embolism

Using an extension set (with a clamp, if necessary, depending on the specific device) helps reduce the potential for air embolism. Having a clampable extension tubing eliminates the need to have the patient do the Valsalva-manoeuvre. (This manoeuvre has questionable efficacy even under the best of conditions).

Even if the central line has a one way valve and does not need a clamp, if you were to encounter a situation where the line needed to be clamped such as finding air in the IV line or blood backing up in the tubing, you have a built-in safety mechanism. Remember, some lines can not be clamped due to the high risk of damage to the line itself. These lines are very fragile, as they are made of materials that have “memory”, and can remember the insult of repeated manipulation. Therefore, using an extension tubing decreases the risk of damage to the line and hence of air embolism.

## 3. Personal safety

Finally, use of an extension tubing means that you are performing procedures at a distance from the entrance site and are less likely to be contaminated by blood or body fluids.

## 4. Home Care Follows Suit

Nurses caring for patients with central lines in other clinical settings also support this practice. For example, home care nurses in Vancouver requires

that we send every central line patient home with an extension tubing in place so that nurses can provide safe care.

Submitted by  
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## LIBRARY/CANCER INFORMATION CENTRE

**Unconventional Cancer Therapies Manual** is available on the BC Cancer Agency website [www.bccancer.bc.ca](http://www.bccancer.bc.ca) under Patient/Public Info, Unconventional Therapies. 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.

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Vancouver Island Centre (VICC)	(250) 519-5500	Toll-Free 1-(800)-670-3322

### REGIONAL CANCER CENTRE ACCESS

BULLETIN UPDATES		LOCATION
Cancer Drug Manual		H:\everyone\systemic\chemo\cancer drug manual monographs
Pre-Printed Orders		H:\everyone\systemic\chemo\Orders\VCC
<u>BMTMM03-01</u>	<u>GIFOLFIRI</u>	<u>GOCXRADC</u>
<u>BRAJFEC</u>	<u>GIFUR3</u>	<u>LYFLU</u>
Protocol Summaries		H:\everyone\systemic\chemo\Protocol\tumour site"
Index of Protocol Summaries		Index_NT or Index_W6
<u>BRAVDOC7</u>		
<u>LYFLU</u>		
Patient Education Handout		H:\everyone\systemic\chemo\Pt Education
Provincial Systemic Therapy Policies		H:\everyone\systemic\chemo\policies
Reimbursement		H:\everyone\systemic\chemo\Reimburs
Benefit Drug List (1 Mar 03)		BenefitList.doc
Class 2 Form (1 Mar 03)		Class2.doc

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)

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Patient Education Handout (also available on our website <a href="http://www.bccancer.bc.ca">www.bccancer.bc.ca</a> )		
Pre-printed Orders:		
<input type="checkbox"/> BMTMM03-01	<input type="checkbox"/> GIFOLFIRI	<input type="checkbox"/> GOCXRADC
<input type="checkbox"/> BRAJFEC	<input type="checkbox"/> GIFUR3	<input type="checkbox"/> LYFLU
Protocol Summaries: (also available on our website <a href="http://www.bccancer.bc.ca">www.bccancer.bc.ca</a> )		
Index of Protocol Summaries	<input type="checkbox"/> Index_NT	<input type="checkbox"/> Index_W6
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Provincial Systemic Therapy Program Policies		
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<input type="checkbox"/> Benefit Drug List (01 Mar 2003)		
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Systemic Therapy Update Index (also available on our website <a href="http://www.bccancer.bc.ca">www.bccancer.bc.ca</a> )		
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