

Volume 12, Number 4 for health professionals who care for cancer patients April 2009 Website access at <u>http://www.bccancer.bc.ca/HPI/ChemotherapyProtocols/stupdate.htm</u>

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IN TOUCH phone list is provided if additional information is needed.

EDITOR'S CHOICE:

HIGHLIGHTS OF CHANGES IN PROTOCOLS, PRE-PRINTED ORDERS AND PATIENT HANDOUTS

The **Leukemia/BMT and Lymphoma/Myeloma Tumour Groups** have introduced two new thalidomide-based protocols. A BC Cancer Agency Compassionate Access Program (CAP) request must be approved prior to treatment. The UMYMPT protocol (melphalan, prednisone, thalidomide) is for patients with multiple myeloma and who are candidates for chemotherapy. The UMYCTD protocol (cyclophosphamide, thalidomide, dexamethasone) is for patients with primary light-chain amyloidosis and myeloma with/without secondary amyloidosis. Refer to the UMYMPT and UMYCTD protocols for more complete eligibility criteria (www.bccancer.bc.ca/HPI/ChemotherapyProtocols/Lymphoma/).

Note the BC Cancer Agency does not fund thalidomide at this time but it covers the other agents used in these regimens (i.e. melphalan, prednisone, cyclophosphamide, dexamethasone). The <u>Canadian</u> <u>THALOMID® Access Program</u> (CANTAP) can be contacted at 1-888-611-6817 to apply for a compassionate supply of thalidomide based on the financial assessment of the patient. If CANTAP application is denied, the patient has the option to self-pay.

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The **Lung Tumour Group** has revised or replaced a number of protocols to help clarify their indications of these treatment protocols as well as identify any use of combined modality (chemoradiation) (see List of New and Revised protocols in this issue for more details):

Old codes	New codes
LUCAV	Replaced by two protocols: LUOTCAV, LUSCCAV
LUCISDOC	LUAVDC
ULUGEF	ULUAVGEF
LUMMPPEM	LUMMPP
ULUPAC	ULUOTPAC

DRUG UPDATE

Patient Assistance Programs: The Patient Assistance Programs on the BCCA website contains information on Home Injection programs and Supportive Care Medications (see under <u>Reimbursement and Forms</u>). The list provides information regarding funding and home administration of medications offered from the corresponding manufacturers. For any updates on Patient Assistance Programs, please contact: <u>druginfo@bccancer.bc.ca</u>

CANCER DRUG MANUAL

Temsirolimus Monograph and Patient Handout have been developed. Expert review was provided by Dr. Christian Kollmannsberger (medical oncologist) and Victoria Kyritsis (clinical pharmacist) of the GU Tumour Group.

Erlotinib Monograph has been revised to include *hepatorenal syndrome* as an uncommon side effect and an updated dose modification for *hepatic failure*. The **Patient Handout** has been revised to include a caution of interaction with *antacids*.

Tamoxifen Handout has been revised to include a caution on potential interactions with antidepressants which selectively inhibit the serotonin receptor (SSRI), in particular paroxetine.

PROVINCIAL SYSTEMIC THERAPY PROGRAM POLICIES

Spill Management of Hazardous Drugs (Policy V-30) has been completely updated with more cleanup details for personnel contamination, spill within and outside of the biological safety cabinet (www.bccancer.bc.ca/HPI/ChemotherapyProtocols/Policies.htm).

CONTINUING EDUCATION - ONCOLOGY PHARMACY EDUCATION NEEDS SURVEY

The **Canadian Association of Pharmacy in Oncology (CAPhO)** is conducting a survey for pharmacists working in an oncology setting. The goal is to determine if there is a need for a national oncology pharmacy education program, including collecting information on the format and what the specific educational goals of the program should be. Participants in the survey will be entered into a draw

for complimentary registration for the National Oncology Pharmacy Symposium (NOPS) to be held in Ottawa, 23-25 October 2009.

Educational programs that address oncology pharmacy as a specialty exist in other countries. This includes the preparation course for the board certification exam in the US and a postgraduate certificate in oncology pharmacy in Britain. In Canada, a variety of educational resources are available at the provincial level, but there is considerable variation from province to province.

For more details regarding the survey, please contact Rhonda Kalyn, BCCA Pharmacy CON Educator and CAPhO Education Chair, at: <u>rkalyn@bccancer.bc.ca</u>.

PRACTICE UPDATE - CHECKING OF INFUSIONAL CHEMOTHERAPY DEVICES

Frequently Asked Questions (FAQ):

Why must 2 nurses check the programming of electronic infusion devices (i.e. pumps) while only one nurse needs to check an elastomeric infusion device (i.e. INFUSOR[®])?

Electronic infusion devices (i.e. pumps) are independently double checked by nurses because there is a greater potential of error involved with the complexity of the specific manual programming process. Elastomeric devices (i.e. INFUSOR®) are <u>not</u> routinely double checked by nurses because there is lesser potential for error once they leave pharmacy. However, the nurse must ensure that the elastomeric infusion device dispensed is the correct one, as specified in the pre printed order (PPO).

What *are* the appropriate medication checks for an elastomeric infusion device?

The "7 Rights" of medication checking that apply to general medications also apply to infusional chemotherapy drugs administered via an elastomeric device. These are: Right reason, Right patient, Right drug, Right dose, Right route, Right time, and Right documentation.

When checking a dose of infusional chemotherapy being delivered with an elastomeric device you will therefore ask:

- Right Reason: Is this patient to receive chemotherapy?
- Right Patient: Does the drug label have the right patient's name on it?
- Right Drug: Is the drug dispensed the drug that was ordered?
- Right Dose: Does the dose dispensed match the dose that was ordered?
- Right Route: Is the drug constituted for use via the right route?
- Right Time: Does the date/time/duration of infusion noted on the device match the physician's order? Is the device the one that is specified on the PPO? i.e. LV2 or LV5? (The duration of infusion is determined by the size and structure of the elastomeric device).
- Right Documentation: Have I documented that I gave this drug, using the device specified by the protocol and PPO for this patient?

The information within the chemotherapy PPO for protocols involving infusional chemotherapy prompts this process.

FAQ: Where is this information available?

BCCA Nursing Practice Reference C-252 now includes new 2 directives:

- Chemotherapy certified nurses will adhere to the principles and guidelines outlined in the College of Registered Nurses of British Columbia Practice Standard: Medications, including the seven "rights" of medication administration (www.crnbc.ca/downloads/408.pdf).
- The nurse initiating a chemotherapy infusion via an elastomeric device (e.g. INFUSOR®) will ensure that the device dispensed is the type and model specified in the PPO.

LIST OF NEW AND REVISED PROTOCOLS, PRE-PRINTED ORDERS AND PATIENT HANDOUTS

BC Cancer Agency Protocol Summaries, Provincial Pre-Printed Orders (PPPOs) and Patient Handouts are revised periodically. New and revised protocols, PPPOs and patient handouts for this month are listed below. Protocol codes for treatments requiring "Compassionate Access Program" (previously Undesignated Indication Request) approval are prefixed with the letter U.

CODE	Protocol	PPPO	Patient Handout	Protocol Title
UGUTEM			V	Therapy for Advanced Renal Cell Carcinoma Using Temsirolimus (TORISEL®)
LUOTCAV	V	\checkmark		Treatment of Thymoma/Thymic Carcinoma with Cyclophosphamide, Doxorubicin and Vincristine (CAV)
LUPUPE	V	\checkmark		Treatment of Cancer of Unknown Primary Involving the Thorax with Cisplatin and Etoposide
LUSCCAV	V	\checkmark		Treatment of Extensive Small Cell Lung Cancer (SCLC) with Cyclophosphamide, Doxorubicin and Vincristine (CAV)
UMYCTD	V			Treatment of Systemic Light-chain (AL) Amyloidosis and Multiple Myeloma Using Cyclophosphamide, Thalidomide and Dexamethasone
UMYMPT	V			Treatment of Multiple Myeloma Using Melphalan, Prednisone and Thalidomide

NEW protocols, PPPOs and Patient Handouts (AFFECTED DOCUMENTS ARE CHECKED):

REVISED PROTOCOLS, PPPOS AND PATIENT HANDOUTS (AFFECTED DOCUMENTS ARE CHECKED):

CODE	Protocol	PPPO	Patient Handout	Changes	Protocol Title
BRAVNAV		Ø		Added volume of saline used for flushing, unsafe abbreviations and symbols replaced	Palliative Therapy For Symptomatic Metastatic Breast Cancer Using Vinorelbine
BRLAACD	V			Docetaxel administration standard clarified, unsafe abbreviations and symbols replaced	Locally Advanced Breast Cancer using Doxorubicin and Cyclophosphamide followed by Docetaxel (TAXOTERE®)
UGIAJFFOX	V			Dose modification for bolus leucovorin clarified, physician contact revised, unsafe abbreviations and symbols replaced	Adjuvant Combination Chemotherapy for Stage III Colon Cancer Using Oxaliplatin, Fluorouracil and Folinic Acid (Leucovorin)

CODE	Protocol	PPPO	Patient Handout	Changes	Protocol Title
UGIFFIRB	V			Dose modification for bolus leucovorin clarified, physician contact revised, unsafe abbreviations and symbols replaced	Palliative Combination Chemotherapy for Metastatic Colorectal Cancer Using Irinotecan, Fluorouracil, Folinic Acid (Leucovorin) and Bevacizumab
UGIFFOXB	V			Dose modification for bolus leucovorin clarified	Palliative Combination Chemotherapy for Metastatic Colorectal Cancer Using Oxaliplatin, 5-Fluorouracil, Folinic Acid (Leucovorin) and Bevacizumab
GIFOLFIRI	V			Eligibility and dose modification for bolus leucovorin clarified, physician contact revised, unsafe abbreviations and symbols replaced	First Line Palliative Combination Chemotherapy for Metastatic Colorectal Cancer Using Irinotecan, Fluorouracil and Folinic Acid (Leucovorin)
UGIFOLFOX	V			Dose modification for bolus leucovorin clarified, physician contact revised, unsafe abbreviations and symbols replaced	Palliative Combination Chemotherapy for Metastatic Colorectal Cancer Using Oxaliplatin, Fluorouracil and Folinic Acid (Leucovorin)
GIGFOLFIRI				Dose modification for bolus leucovorin clarified, physician contact revised, unsafe abbreviations and symbols replaced	Second Line Palliative Combination Chemotherapy for Metastatic Gastric or Esophageal Adenocarcinoma Using Irinotecan, Fluorouracil and Folinic Acid (Leucovorin)
UGIRAJFFOX	V			Dose modification for bolus leucovorin clarified, physician contact revised, unsafe abbreviations and symbols replaced	Adjuvant Combination Chemotherapy for Stage III Rectal Cancer Using Oxaliplatin, Fluorouracil and Folinic Acid (Leucovorin)
UGUSUNI	V			Dose modifications for renal and hepatic function moved to Precautions section, unsafe abbreviations and symbols replaced	Second Line Treatment of Advanced C-kit Positive Gastrointestinal Stromal Cell Tumours (GIST's) After Imatinib Using Sunitinib (SUTENT®)
HNFURT	V	V		Infusion time in Dose Modifications revised	Combined Modality Therapy for Advanced Head and Neck Cancer using Mitomycin, Fluorouracil and Split Course Radiation Therapy
ULKCMLD		V		Amount of dasatinib supply increased to one month	Treatment of Chronic Myeloid Leukemia and Ph+ Acute Lymphoblastic Leukemia Using Dasatinib (SPRYCEL®)
LUALTL		Ø		Deleted	Therapy for Limited Stage SCLC Using Alternating CAV/EP Plus Early Thoracic Irradiation Using Cyclophosphamide, Doxorubicin, Vincristine, Etoposide and Cisplatin
LUAVDC	Ø	Ø		Replacing LUCISDOC	First-Line Treatment of Advanced Non-Small Cell Lung Cancer (NSCLC) with Cisplatin and Docetaxel

CODE	Protocol	PPPO	Patient Handout	Changes	Protocol Title
LUAVDOC	V	V		Eligibility revised, unsafe abbreviations and symbols replaced	Second-Line Treatment of Advanced Non-Small Cell Lung Cancer (NSCLC) with Docetaxel
ULUAVGEF	V	V		Replacing ULUGEF	Third-Line Treatment of Advanced Non-Small Cell Lung Cancer (NSCLC) with Gefitinib (IRESSA®)
LUAVPEM	V	V		Serum creatinine in Tests section clarified	Second-Line Treatment of Advanced Non-Small Cell Lung Cancer (NSCLC) With Pemetrexed
LUCAV	V	V		DELETED (replaced by LUSCCAV, LUOTCAV)	Treatment for extensive small cell lung cancer (SCLC) with Cyclophosphamide, Doxorubicin and Vincristine (CAV)
LUCISDOC	V	Ø		Protocol code and eligibility revised, unsafe abbreviations and symbols replaced	First-Line Treatment of Advanced Non-Small Cell Lung Cancer (NSCLC) with Cisplatin and Docetaxel
LUCMT1	V	Ø		Deleted	Combined Chemotherapy and Radiation Treatment for Stage 3 Non-Small Cell Lung Cancer
ULUGEF	V	Ø		Protocol code revised, unsafe abbreviations and symbols replaced	Third-Line Treatment of Advanced Non-Small Cell Lung Cancer (NSCLC) with Gefitinib (IRESSA®)
LUMMPG	V	Ø		Eligibility revised, unsafe abbreviations and symbols replaced	Treatment of Malignant Mesothelioma with Platinum and Gemcitabine
LUMMPP	V	V		Replacing LUMMPPEM	Treatment of Malignant Mesothelioma with Platinum and Pemetrexed
LUMMPPEM	V	Ø		Protocol code, eligibility, tests, premedications, dose modifications, references revised; unsafe abbreviations and symbols replaced	Treatment of Malignant Mesothelioma with Platinum and Pemetrexed
ULUOTPAC	V			Replacing ULUPAC	Treatment of Thymoma with Platinum, Doxorubicin, and Cyclophosphamide
ULUPAC	V	V		Protocol code revised, unsafe abbreviations and symbols replaced	Treatment of Thymoma with Platinum, Doxorubicin, and Cyclophosphamide
LUPAVESE	V	V		Deleted	Treatment For Extensive Stage Small Cell Lung Cancer (SCLC) With Cisplatin, Doxorubicin, Vincristine And Etoposide (PAVE)
LUPAVESL		Ø		Deleted	Treatment For Limited Stage Small Cell Lung Cancer (SCLC) With Cisplatin, Doxorubicin, Vincristine And Etoposide (PAVE), And Cisplatin And Etoposide (EP) Concurrent With Early Thoracic Irradiation

CODE	Protocol	PPPO	Patient Handout	Changes	Protocol Title
LUPESL	V	V		Deleted	Treatment for Limited Stage Small Cell Lung Cancer (SCLC) with Etoposide and Cisplatin (EP) and Early Thoracic Irradiation
UMYBORTEZ	V			Green tea warning added, H. zoster prophylaxis added, unsafe abbreviations and symbols replaced	Treatment of Multiple Myeloma with Bortezomib
USAAVGS	V			Dose modifications for renal and hepatic function moved to Precautions section, unsafe abbreviations and symbols replaced	Second Line Treatment of Advanced C-kit Positive Gastrointestinal Stromal Cell Tumours (GIST's) After Imatinib Using Sunitinib (SUTENT®)
SMAJIFN	V			Unsafe abbreviations and symbols replaced, booking clarified	Adjuvant Therapy of High Risk Malignant Melanoma with High Dose Interferon (HDIFN) – alpha-2b
SMCCNU		Ø		Unsafe abbreviations and symbols replaced; administration of lomustine clarified	Second line treatment for metastatic malignant melanoma using Lomustine (CCNU)
SMDTIC		Ø		Unsafe abbreviations and symbols replaced	Therapy for metastatic malignant melanoma using high dose single agent Dacarbazine (DTIC)

WEBSITE RESOURCES

The following are available on the BC Cancer Agency website (<u>www.bccancer.bc.ca</u>) under the Health Professionals Info section:

www.bccancer.bc.ca/HPI/ChemotherapyProtocols/Forms		
www.bccancer.bc.ca/cdm		
www.bccancer.bc.ca/CaMgmtGuidelines		
www.bccancer.bc.ca/ChemoProtocols		
www.bccancer.bc.ca/HPI/ChemotherapyProtocols/Policies		
www.bccancer.bc.ca/HPI/ChemotherapyProtocols/stupdate		
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FRASER VALLEY CENTRE (FVCC)	(604) 930-2098	Toll-Free 1-(800) 523-2885
VANCOUVER CENTRE (VCC)	(604) 877-6000	Toll-Free 1-(800) 663-3333
VANCOUVER ISLAND CENTRE (VICC)	(250) 519-5500	Toll-Free 1-(800) 670-3322