Regimen Reference Order – H&N – cetuximab (maintenance)

ARIA: H&N – [cetuximab (maintenance)]

Planned Course: **Weekly until disease progression or unacceptable toxicity (1 cycle = 28 days)**
Indication for Use: **Squamous Cell Cancer of Head and Neck; Advanced/Recurrent**

CVAD: At Provider's Discretion

Proceed with treatment if:
Day 1 ONLY
ANC equal to or greater than 1.5 x 10^9/L AND Platelets equal to or greater than 100 x 10^9/L
- **Contact Physician if parameters not met**

SEQUENCE OF MEDICATION ADMINISTRATION

Pre-treatment Requirements

Drug	Dose	CCMB Administration Guideline
Not Applicable		

Treatment Regimen – H&N – cetuximab (maintenance)

Establish primary solution 500 mL of: normal saline

Drug	Dose	CCMB Administration Guideline
Days 1, 8, 15 and 22		
cetirizine	10 mg	Orally 30 minutes prior to cetuximab
dexamethasone	8 mg	IV in normal saline 50 mL over 15 minutes
Wait 30 minutes after completion of IV pre-medications before starting cetuximab		
cetuximab	250 mg/m^2	IV over 1 hour (administered undiluted) Doses greater than 600 mg must be infused over 2 hours *Use 0.2 or 0.22 micron filter* **Alert:* *Pharmacy to ensure final volume on label* **Nursing Alert:* *IV tubing is primed with cetuximab*
All doses will be automatically rounded that fall within CCMB Approved Dose Bands. See Dose Banding document for more information		

In the event of an infusion-related hypersensitivity reaction, refer to the **'Hypersensitivity Reaction Standing Order'**

REQUIRED MONITORING

All Cycles

Day 1

- CBC, biochemistry, serum creatinine, urea, liver enzymes, magnesium, calcium and albumin as per Physician Orders

Days 8, 15 and 22

- No blood work required

All Doses

- Clinical assessment of cetuximab-related skin toxicity
- Full vital signs (temperature, heart rate, respiratory rate, blood pressure and O_2 saturation) at baseline and as clinically indicated
- For patients with no prior reactions to cetuximab, no observation period is required after cetuximab administration. Patient can be discharged from treatment room if stable whether they had a reaction or not
- For patients who have had a previous reaction to cetuximab, observe patient for one hour after cetuximab infusion. Full vital signs prior to discharge

Recommended Support Medications

Drug	Dose	CCMB Administration Guideline
Sunscreen	Minimum SPF 15 (PABA free, zinc oxide or titanium dioxide preferred)	Apply topically a broad-spectrum sunscreen liberally 30 minutes before going outdoors. Reapply every 2 hours and after swimming
Moisturizing lotion	Fragrance-free	Apply topically to face, hands, feet, neck, back and chest daily in the morning on rising and ***as needed***
In the event of a cetuximab-induced skin rash:		
doxycycline	100 mg	Orally twice daily as directed by clinic
hydrocortisone cream	1%	Apply topically daily at bedtime to face, hands, feet, neck, back and chest as directed by clinic

DISCHARGE INSTRUCTIONS

- Patients should be instructed to contact their cancer team immediately if symptoms of hypersensitivity reactions occur after discharge
- Warn patients of the possibility of a late onset reaction to cetuximab as reactions may occur several hours after infusion or with subsequent infusions
- Instruct patient to use Recommended Support Medications

ADDITIONAL INFORMATION

- cetuximab can cause hypomagnesemia
- cetuximab causes dermatological and nail changes
- cetuximab can cause interstitial lung disease, pneumonitis and exacerbation of pre-existing fibrotic lung disease
- **Note: H&N – [cetuximab (maintenance)]** regimen starts 7 days after completing Cycle 6, Day 15 of either **H&N – [cetuximab + fluorouracil + CARBO]** or **H&N – [cetux+5-FU+CISplatin]**