

## Regimen Reference Order – BMT – bortezomib + dexamethasone

ARIA: BMT – [bortezomib + dexamethasone]

Planned Course: Every 28 days for up to 5 cycles

Indication for Use: Multiple Myeloma; Transplant eligible

CVAD: At Provider's Discretion

### **Proceed with treatment if:**

**Day 1 (and Day 15 if on Day 1, ANC less than  $1 \times 10^9/L$  OR platelets less than  $100 \times 10^9/L$ )**

- ANC equal to or greater than  $0.5 \times 10^9/L$  AND Platelets equal to or greater than  $30 \times 10^9/L$

❖ Contact Leukemia/BMT (L/BMT) Physician if parameters not met

**Note:** Hepatitis B serology results must be reviewed in accordance with CCMB Policy Hepatitis B Monitoring for Oncology and Hematology Patients

## SEQUENCE OF MEDICATION ADMINISTRATION

### Pre-treatment Requirements

Drug	Dose	CCMB Administration Guideline
Not applicable		

### Treatment Regimen – BMT – bortezomib + dexamethasone

Drug	Dose	CCMB Administration Guideline
bortezomib	1.5 mg/m <sup>2</sup>	Subcutaneous once weekly on Days 1, 8, 15 and 22
dexamethasone	40 mg	Orally once daily in the morning on Days 1, 8, 15 and 22 Take with food (Self-administered at home)

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

## REQUIRED MONITORING

### Hepatitis B serology

- Hepatitis B surface antigen and Hepatitis B core antibody (drawn within preceding 5 years)

### All Cycles

#### Day 1

- CBC, reticulocyte count, serum creatinine, calcium, albumin, random glucose and liver enzymes as per Physician Orders
- Serum Protein Electrophoresis (SPEP)/Free Light Chain Ratio (FLCH) (response assessment)

#### Day 15 (required only if on Day 1, ANC less than $1 \times 10^9/L$ OR platelets less than $100 \times 10^9/L$ )

- CBC, reticulocyte count

### Recommended Support Medications

Drug	Dose	CCMB Administration Guideline
valACYclovir	500 mg	Orally once daily
metoclopramide	10 – 20 mg	Orally every 4 hours as needed for nausea and vomiting

## DISCHARGE INSTRUCTIONS

- Instruct patient to continue taking anti-emetic(s) at home
- dexamethasone is a cancer therapy in this treatment regimen. Instruct patient to take dexamethasone in the morning on the day they are scheduled for bortezomib treatment
- Remind patient to take valACYclovir (shingles prophylaxis) at home. valACYclovir treatment continues for 4 weeks after the last dose of bortezomib
- bortezomib has potential for drug-drug interactions. Patients should notify clinic prior to starting any new medication
- Advise patient to avoid green tea to prevent interactions with bortezomib
- Avoid grapefruit and grapefruit juice, Seville oranges (i.e. orange marmalade) and starfruit
- Reinforce safe handling precautions of medications, blood and body fluids for 48 hours after completion of chemotherapy

## ADDITIONAL INFORMATION

- Due to the risk of reactivation of Hepatitis B virus (HBV) while on this treatment regimen, prescriber must adhere to CCMB Policy ***Hepatitis B Monitoring for Oncology and Hematology Patients*** for ordering and interpreting HBV serology and prescribing antiviral prophylaxis
- bortezomib may be modified to 1.3 mg/m<sup>2</sup> at the discretion of the physician
- Consideration may be given to reducing dexamethasone dose at the physician's discretion to 20 mg for patients older than 75 years or for patients with a body mass index of less than 18.5
- All patients should be considered for bisphosphonate therapy
- bortezomib may cause peripheral neuropathy; dose modification may be required