Regimen Reference Order – BMT – ruxolitinib (aGVHD)

Planned Course: **Twice daily until disease resolution or unacceptable toxicity (1 cycle = 28 days)**
Indication for Use: **Acute Graft Versus Host Disease**

Proceed with treatment if:

ANC equal to or greater than 0.75 x 10^9/L AND Platelets equal to or greater than 20 x 10^9/L

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

SEQUENCE OF MEDICATION ADMINISTRATION

Pre-treatment Requirements

Drug	Dose	CCMB Administration Guideline
Not Applicable		

Treatment Regimen – BMT – ruxolitinib (aGVHD)

Drug	Dose	CCMB Administration Guideline
ruxolitinib	5 mg *	Orally twice daily with or without food Swallow whole **(Self-administered at home)**

*Consider increasing the dose to 10 mg twice daily after at least 3 days of treatment if the ANC and platelet counts are not decreased by 50% or more relative to the first day of dosing. ruxolitinib dose modifications will occur at the L/BMT Physician's discretion

ruxolitinib (JAKAVI®) available dosage strengths: 5 mg, 10 mg, 15 mg and 20 mg tablets
Classification: Cytotoxic, Hazardous

REQUIRED MONITORING

Baseline

- Evaluate for active and latent tuberculosis
- Hepatitis B and C
- HIV serology

Cardiac monitoring

- EKG at baseline and then as required
- Blood pressure and pulse rate should be evaluated at each physician appointment

Throughout therapy

- CBC, serum creatinine, urea, electrolytes, liver enzymes and total bilirubin as per Physician Orders
  - At baseline, then
  - Every 2 to 4 weeks until dose is stabilized, then as clinically indicated thereafter
- Lipid monitoring as per Physician Orders
  - At baseline, then
  - 4 weeks after starting therapy, then as clinically indicated thereafter

Recommended Support Medications

Drug	Dose	CCMB Administration Guideline
Post-transplant supportive care medications recommended by L/BMT Physician		

INSTRUCTIONS FOR PATIENT

- Patients should:
  - be instructed that their dose may be adjusted during their course of therapy
  - be advised not to stop ruxolitinib abruptly. Dose reductions will be provided by clinic when required
  - be aware of the risk of low blood counts and to report any signs or symptoms of infection
  - be aware that ruxolitinib can increase the risk of non-melanoma skin cancers and to report any new or changing skin lesions
- ruxolitinib has potential for drug-drug interactions. Patients should notify clinic prior to starting any new medication
- Avoid grapefruit and grapefruit juice, Seville oranges (i.e. orange marmalade), and starfruit
- Patients should not receive live vaccines while on ruxolitinib
- Reinforce applicable safe handling precautions of medications, blood and body fluids while on ruxolitinib

ADDITIONAL INFORMATION

- Serious bacterial, mycobacterial, fungal and viral infections including viral reactivation and other opportunistic infections have been reported in patients treated with ruxolitinib
- ruxolitinib can increase cholesterol levels
- ruxolitinib can cause a decrease in heart rate and prolongation of the PR interval
- Support protocol is available under **Immunosuppressants** in the “Bone Marrow Transplant” folder
- ruxolitinib will be dispensed by CCMB Pharmacy for outpatient administration only