

Regimen Reference Order – LEUK – AL4 (Continuation)

ARIA: LEUK - [AL4 (Continuation)]

Planned Course: 1 cycle = 21 days

Repeat Continuation Therapy until the total duration of therapy is 2 years from the date of Complete Remission

Indication for Use: Acute Lymphoblastic Leukemia

CVAD: Preferred (VESICANT INVOLVED)

Proceed with treatment if:

Cycle 1 Day 1

- **ANC equal to or greater than $1 \times 10^9/L$ AND Platelets equal to or greater than $100 \times 10^9/L$**
- **AST less than 8 times the upper limit of normal**
- **Direct bilirubin less than $25 \mu\text{mol/L}$**

Cycle 2 and Onwards Day 1

- **ANC equal to or greater than $0.5 \times 10^9/L$ AND Platelets equal to or greater than $75 \times 10^9/L$**
- **AST less than 8 times the upper limit of normal**
- **Direct bilirubin less than $25 \mu\text{mol/L}$**
- ❖ **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 – LEUK – AL4 (Continuation)

Establish primary solution 500 mL of: normal saline

Drug	Dose	CCMB Administration Guideline
dexamethasone	6 mg/m ² /day (round to nearest 2 mg)	Orally divided twice a day with food on Days 1 to 5 (Self-administered at home)
vinCRiStine	2 mg (standard dose)	IV in normal saline 25 mL over 2 to 3 minutes by gravity infusion on Day 1
mercaptopurine	50 mg/m ² (round to nearest 25 mg)	Orally once daily on an empty stomach on Days 1 to 14 Do not take with milk or milk-based products (Self-administered at home)
methotrexate	60 mg/m ²	Orally once weekly on Days 2, 9 and 16 Take on an empty stomach (Self-administered at home)

Patients will receive Triple Intrathecal Therapy every 18 weeks while receiving continuation therapy (Patient is placed on support regimen – LEUK – [AL4 (IT)] beginning with CNS phase which occurs every 126 days = 18 weeks). Intrathecal is given at the start of treatment cycles where possible. Refer to Appendix A

mercaptopurine (PURINETHOL®) available dosage strength: 50 mg tablets

Classification: Cytotoxic, Hazardous

methotrexate available dosage strength: 2.5 mg tablets

Classification: Cytotoxic, Hazardous

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

REQUIRED MONITORING

AL4 (Continuation)

Day 1

- CBC and biochemistry as per Physician Orders

Recommended Support Medications

Drug	Dose	CCMB Administration Guideline
sulfamethoxazole-trimethoprim DS	800/160mg	Orally twice daily on Saturdays and Sundays only

DISCHARGE INSTRUCTIONS

- If nausea or mucositis develops, instruct patient to contact their L/BMT physician
- sulfamethoxazole-trimethoprim should not be administered on intrathecal therapy days due to potential drug interaction
- mercaptopurine should not be taken at the same time as milk or milk-based products. Cow's milk in particular, contains high concentrations of xanthine oxidase which inactivates mercaptopurine
- Reinforce safe handling precautions of medications, blood and body fluids for 48 hours after completion of chemotherapy

ADDITIONAL INFORMATION

- Intrathecal therapy is part of this regimen and is given every 18 weeks. See APPENDIX A AL4 (IT)
- Dose adjustments are made to methotrexate and mercaptopurine to achieve a desired nadir ANC of $0.5 \times 10^9/L$ to $0.75 \times 10^9/L$ and platelets of $75 \times 10^9/L$ to $100 \times 10^9/L$
- Treatment may be delayed if patient is experiencing moderate or severe mucositis
- If patient has recurrent mouth sores, they may be evaluated for HSV and considered for valacyclovir prophylaxis

APPENDIX A

LEUK – AL4 (IT)	
<p>Planned course: Every 18 weeks from the beginning of CNS Phase. Continue until the completion of AL4 (Continuation)</p>	
<p><i>Proceed with treatment if:</i></p> <ul style="list-style-type: none"> • <i>ANC equal to or greater than $0.5 \times 10^9/L$ AND Platelets equal to or greater than $50 \times 10^9/L$</i> ❖ Contact L/BMT Physician if parameters not met 	
Drug and Dose	CCMB Administration Guideline
Every 18 weeks (Starting with beginning of CNS phase)	
<p><u>Triple Intrathecal:</u> methotrexate 12 mg cytarabine 40 mg hydrocortisone 50 mg</p>	<p>Intrathecal in 6 mL preservative free normal saline administered in L/BMT Clinic</p>
<p>IT is ordered as a separate cyclical Support regimen LEUK – [AL4 (IT)]</p>	