Regimen Reference Order – CLL – zanubrutinib

ARIA: LYMP – [zanubrutinib]

Planned Course: **Until disease progression or unacceptable toxicity (1 cycle = 30 days)**
Indication for Use: **Chronic Lymphocytic Leukemia**

Proceed with treatment if:

ANC equal to or greater than 0.5 x 10^9/L AND Platelets equal to or greater than 50 x 10^9/L

- **Contact Hematologist if parameters not met**

Pre-treatment requirements

Drug	Dose	CCMB Administration Guideline
allopurinol	300 mg	Orally once daily for 10 days to begin 3 days prior to Cycle 1 and at provider's discretion for subsequent cycles **(Self-administered at home)** Only patients at risk of tumor lysis syndrome will be prescribed allopurinol

Treatment Regimen – LYMP – zanubrutinib

Drug	Dose	CCMB Administration Guideline
zanubrutinib	160 mg*	Orally twice daily with or without food Swallow whole **(Self-administered at home)**
*Alternate dosing schedule of 320 mg once daily may be used at the hematologist's discretion		
zanubrutinib (BRUKINSA®) available dosage strength: 80 mg capsule **Classification: Cytotoxic, Hazardous**		

REQUIRED MONITORING

Baseline

- Hepatitis B serology
- Molecular profile (IgHV, TP53 and FISH)
- EKG
- Full vital signs (temperature, heart rate, respiratory rate, blood pressure and O_2 saturation)

Weeks 1, 4, 8 and 12 and at every clinic visit thereafter (at least every 3 months)

- CBC, serum creatinine, urea, electrolytes, liver enzymes, LDH, total bilirubin, uric acid and albumin as per Physician Orders
- Monitor blood pressure and heart rate for tachycardia and irregular rhythm at every clinic visit
- At physician's discretion, EKG to assess for atrial fibrillation if tachycardia or irregular rhythm present

Recommended Support Medications

Drug	Dose	CCMB Administration Guideline
None required		

INSTRUCTIONS FOR PATIENT

- Patients should report signs and symptoms of bleeding (i.e. excess bruising), palpitations, syncope and skin changes
- Patients should use necessary sun protection due to a potential increased risk of skin cancer
- When zanubrutinib is prescribed twice daily, doses of zanubrutinib should be separated by approximately 12 hours
- zanubrutinib has potential for drug-drug interactions. Patients should notify clinic and pharmacist prior to starting any new medication
- Avoid grapefruit and grapefruit juice, Seville oranges (i.e. orange marmalade) and starfruit
- Reinforce applicable safe handling precautions of medications, blood, and body fluids while on zanubrutinib

ADDITIONAL INFORMATION

- zanubrutinib can cause serious hemorrhage
- Lymphocytosis is expected with therapy and will not be considered evidence of disease progression unless accompanied by other clinical sign of disease progression (i.e. increased lymphadenopathy, constitutional symptoms, etc.)
- Hematologist should be consulted regarding dosing of zanubrutinib pre- and post-surgery for patients undergoing a surgical procedure, including dental surgery, due to risk of bleeding regardless of platelet count