

## Regimen Reference Order – LYMP – CEOP

ARIA: LYMP – [CEOP]

Planned Course: Every 21 days for 6 cycles

Indication for Use: Non-Hodgkin Lymphoma

CVAD: At Provider's Discretion (VESICANT INVOLVED)

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

***ANC equal to or greater than  $1 \times 10^9/L$  AND Platelets equal to or greater than  $100 \times 10^9/L$***

❖ **Contact Hematologist 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   |
|--|--------|---|
| Instruct patient to start vigorous oral pre-hydration (600-900 mL) the morning of cyclophosphamide treatment<br><b>(Self-administered at home)</b> |        |   |
| 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<br><b>(Self-administered at home)</b><br>Only patients at risk of tumor lysis syndrome will be prescribed allopurinol |

### Treatment Regimen – LYMP – CEOP

| Establish primary solution 500 mL of: normal saline |  |   |
|---|--|---|
| Drug  | Dose   | CCMB Administration Guideline   |
| <b>Day 1</b>  |  |   |
| predniSONE  | 100 mg                                       | Orally once in the morning with food<br><b>(Self-administered at home)</b>                          |
| ondansetron   | 16 mg  | Orally 30 minutes pre-chemotherapy  |
| dexamethasone                                       | 12 mg  | Orally 30 minutes pre-chemotherapy  |
| etoposide   | 50 mg/m <sup>2</sup>                         | IV in normal saline 250 mL over 1 hour<br><i>Use non-DEHP bags and non-DEHP administration sets</i> |
| vinCRiStine   | 1.4 mg/m <sup>2</sup> ;<br>maximum dose 2 mg | IV in normal saline 25 mL over 2 to 3 minutes by gravity infusion                                   |
| cyclophosphamide                                    | 750 mg/m <sup>2</sup>                        | IV in normal saline 250 mL over 1 hour  |

| Days 2 and 3  |   |   |
|---|---|---|
| predniSONE  | 100 mg                                      | Orally once daily in the morning with food<br><b>(Self-administered at home)</b>  |
| etoposide   | 100 mg/m <sup>2</sup><br>(to nearest 50 mg) | Orally once daily in the morning on an empty stomach<br>Swallow whole<br><i>*Alert: Doses greater than 200 mg should be split into twice daily dosing. See etoposide Dosing Table on page 3</i><br><b>(Self-administered at home)</b> |
| Days 4 and 5  |   |   |
| predniSONE  | 100 mg                                      | Orally once daily in the morning with food<br><b>(Self-administered at home)</b>  |
| etoposide (VEPESID®) available dosage strength: 50 mg capsule<br>Classification: Cytotoxic, Hazardous |   |   |

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

- CBC, serum creatinine, urea, electrolytes, liver enzymes, LDH, total bilirubin, uric acid and albumin as per Physician Orders

## Recommended Support Medications

| Drug  | Dose  | CCMB Administration Guideline   |
|---|---|---|
| filgrastim (brand name specific)<br>(See Filgrastim Clinical Guide) | 5 mcg/kg<br>(rounded to nearest 300 mcg or 480 mcg) | <b><i>ONLY</i></b> to be given if patient eligible for Growth Factor Support<br>(refer to CCMB Drug Formulary Web App for Primary Prophylaxis eligibility criteria)<br>Subcutaneous once daily for 5 days to start on Day 5 |
| 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
  - Maintain oral intake of 2000 mL (8 glasses) of fluid daily at home
  - Empty bladder every 2 hours while awake and at bedtime for 24 hours after each dose of cyclophosphamide
  - Obtain immediate assistance as per your clinic’s contact instructions if:
    - Symptoms of hemorrhagic cystitis (e.g. dysuria, hematuria)
    - Unable to drink recommended amount of fluid
- Nurse will provide oral etoposide to the patient on Day 1. Remind patient to take etoposide at home
- Patients should notify clinic prior to starting any new medication. etoposide has potential for drug-drug interactions
- Avoid grapefruit and grapefruit juice, Seville oranges (i.e. orange marmalade) and starfruit
- predniSONE is a cancer therapy in this treatment regimen. Remind patient to take predniSONE at home
- Reinforce applicable 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
- For patients who do not tolerate oral etoposide, it may be substituted with intravenous etoposide on Days 2 and 3 at the physician’s discretion. Intravenous etoposide dose would be 50 mg/m<sup>2</sup> on Days 2 and 3 for this regimen
- Oral etoposide is dispensed by CCMB Pharmacy to nursing (treatment room) on Day 1. CCMB Pharmacy will ship oral etoposide to CCP Pharmacy for patients being treated at a CCP
- CCMB Pharmacist is authorized to auto-substitute oral etoposide doses greater than 200 mg to twice daily dosing according to the table below
- **Note: At Cycle 1**, an entry called “*Physician Reminder- Growth Factor 60 y.o.*” will appear in the electronic drug order. **This prompt is to remind the prescriber to order filgrastim for eligible patients**

**etoposide Dosing Table**

| Oral etoposide dose      | Automatic substitution                          |
|--------------------------|---|
| 250 mg orally once daily | 150 mg in the morning and 100 mg in the evening |
| 300 mg orally once daily | 150 mg in the morning and 150 mg in the evening |
| 350 mg orally once daily | 200 mg in the morning and 150 mg in the evening |
| 400 mg orally once daily | 200 mg in the morning and 200 mg in the evening |