

Regimen Reference Order – LYMP – CVP

ARIA: - LYMP – [CVP]

Planned Course: Every 21 days for 6 to 8 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 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
Instruct patient to start vigorous oral pre-hydration (600 – 900 mL) the morning of cyclophosphamide treatment (Self-administered at home)		
allopurinol	300 mg	Orally once daily for 10 days to begin 3 days prior to Cycle 1 (Self-administered at home) Only patients at risk of tumor lysis syndrome will be prescribed allopurinol <u>Note:</u> allopurinol should not be prescribed beyond 10 days unless under the direction of the hematologist. See <i>Additional Information</i>

Treatment Regimen – LYMP – CVP

Establish primary solution 500 mL of: normal saline		
Drug	Dose	CCMB Administration Guideline
Day 1		
predniSONE	100 mg	Orally once in the morning with food (Self-administered at home)
ondansetron	16 mg	Orally 30 minutes pre-chemotherapy
dexamethasone	12 mg	Orally 30 minutes pre-chemotherapy
vinCRISTine	1.4 mg/m ² ; maximum dose 2 mg	IV in normal saline 25 mL over 2 to 3 minutes by gravity infusion
cyclophosphamide	750 mg/m ²	IV in normal saline 250 mL over 1 hour
Days 2 to 5		
predniSONE	100 mg	Orally once daily in the morning 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

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

Recommended Support Medications

Drug	Dose	CCMB Administration Guideline
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
- 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
- Unless patient was taking allopurinol for gout or other reasons unrelated to the patient's underlying lymphoma, allopurinol should not be prescribed with cycle 2 and onwards unless directed by hematologist