

## Regimen Reference Order – LYMP – pentostatin

To order this therapy in ARIA, refer to ADDITIONAL INFORMATION

**Planned Course:** pentostatin once weekly for 4 weeks, then every 2 weeks up to best response or up to a maximum of 12 weeks (given in combination with intravenous alemtuzumab regimen)

**Indication for Use:** T-prolymphocytic leukemia

**CVAD:** At Provider's Discretion

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

- Follow ANC and platelet count requirements for alemtuzumab protocol
- Creatinine clearance equal to or greater than 60 mL/minute
  - ❖ 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
Not Applicable		

### Treatment Regimen – LYMP – pentostatin

Establish primary solution 500 mL of: D5W

Drug	Dose	CCMB Administration Guideline
<b>Days 1, 8, 15, 22, 36, 50, 64 and 78</b>		
<i>*Alert: Ensure pre-medications for alemtuzumab and alemtuzumab are administered prior to D5W Pre hydration. Refer to LYMP – alemtuzumab (IV) RRO</i>		
dextrose 5% in water (D5W)	500 mL	IV over 1 hour (Pre hydration)
ondansetron	16 mg	Orally 30 minutes pre-chemotherapy
dexamethasone	8 mg	Orally 30 minutes pre-chemotherapy <i>*Nursing Alert: this dose is in addition to the 4 mg dose taken prior to alemtuzumab (total dexamethasone dose 12 mg)</i>
pentostatin	4 mg/m <sup>2</sup>	IV in normal saline 25 mL over 20 minutes
dextrose 5% in water (D5W)	500 mL	IV over 1 hour (Post hydration)

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 and serum creatinine prior to each dose as per Physician Orders

## Recommended Support Medications

Drug	Dose	CCMB Administration Guideline
dexamethasone	8 mg	Orally once daily for 2 days starting the day after each dose of pentostatin
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
- Remind patient to take valACYclovir (shingles prophylaxis) and sulfamethoxazole-trimethoprim (*Pneumocystis jirovecii* pneumonia prophylaxis) at home (see alemtuzumab Regimen Reference Order (RRO))
- Reinforce applicable safe handling precautions of medications, blood and body fluids for 48 hours after completion of chemotherapy

## ADDITIONAL INFORMATION

- pentostatin is added to alemtuzumab treatment at physician’s discretion, in patients who do not have an adequate response to alemtuzumab
- 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
- **ARIA ordering:** Support protocol is available under **pentostatin** in the “Lymphoma” folder