

## Regimen Reference Order – MYEL – DRd (IV daratumumab)

ARIA: MYEL - [DRd (IV)]

Planned Course: Until disease progression or unacceptable toxicity (1 cycle = 28 days)

Indication for Use: Multiple Myeloma: First Line (Transplant Ineligible) OR Relapsed/Refractory

CVAD: At Provider's Discretion

### Proceed with treatment if:

#### **lenalidomide:**

**Day 1 of every cycle & Day 15 of Cycles 1 and 2**

- ANC equal to or greater than  $1 \times 10^9/L$  AND Platelets equal to or greater than  $30 \times 10^9/L$

#### **daratumumab:**

- On Day 1, proceed with daratumumab only when lenalidomide starts
- On subsequent treatment days, proceed with daratumumab regardless of CBC

❖ 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
montelukast	10 mg	Orally once daily in the morning starting the <b>day before daratumumab to Day 4, Days 7 to 11, Days 14 to 18 and Days 21 to 25 of Cycle 1</b> Cycle 2 and onwards at the discretion of the physician <b>(Self-administered at home)</b> <i>*Nursing Alert: Notify physician if patient has not taken montelukast. montelukast is prescribed to prevent infusion reactions</i>

### Treatment Regimen – MYEL – DRd (IV daratumumab)

Establish primary solution 500 mL of: normal saline

Drug	Dose	CCMB Administration Guideline
<b>Cycle 1</b>		
cetirizine	10 mg	Orally <b>1 hour</b> prior to daratumumab on <b>Days 1, 2, 8, 15 and 22</b>
acetaminophen	975 mg	Orally <b>1 hour</b> prior to daratumumab on <b>Days 1, 2, 8, 15 and 22</b>
dexamethasone	20 mg	IV in normal saline 50 mL over 15 minutes <b>1 hour</b> prior to daratumumab on <b>Days 1, 2, 8, 15 and 22</b> <i>*Nursing Alert: daratumumab starts 1 hour after completion of dexamethasone</i>

<b>Wait 1 hour after completion of IV pre-medication(s) before starting daratumumab</b>		
daratumumab	8 mg/kg	<p><b>Slow infusion:</b> IV in normal saline 500 mL on <b>Days 1 and 2</b> following administration rates below:</p> <ul style="list-style-type: none"> <li>• 0 to 60 minutes – 50 mL/hour</li> <li>• 60 to 120 minutes – 100 mL/hour</li> <li>• 120 to 180 minutes – 150 mL/hour</li> <li>• 180 minutes onwards – 200 mL/hour</li> </ul> <p>Use 0.2 or 0.22 micron filter</p> <p><i>*Alert: Pharmacy to ensure final volume in bag = 500 mL</i></p> <p><i>*Nursing Alert: IV tubing is primed with daratumumab</i></p>
	16 mg/kg	<p><b>Rapid infusion:</b> IV in normal saline 500 mL over 90 minutes on <b>Days 8, 15, and 22:</b> infuse 100 mL over 30 minutes, then infuse the remaining 400 mL over 60 minutes</p> <p>Use 0.2 or 0.22 micron filter</p> <p><i>*Alert: Pharmacy to ensure final volume in bag = 500 mL</i></p> <p><i>*Nursing Alert: IV tubing is primed with daratumumab</i></p>
lenalidomide	25 mg	Orally once daily on <b>Days 1 to 21</b> , followed by 7 days off Take with or without food. Swallow whole <b>(Self-administered at home)</b>
dexamethasone	20 mg	Orally once daily in the morning with food on <b>Days 9, 16 and 23</b> <b>(Self-administered at home)</b>
<b>Cycle 2</b>		
dexamethasone	40 mg	Orally once daily in the morning with food on <b>Days 1, 8, 15 and 22</b> <b>(Self-administered at home)</b>
cetirizine	10 mg	Orally 30 minutes prior to daratumumab on <b>Days 1, 8, 15 and 22</b>
acetaminophen	975 mg	Orally 30 minutes prior to daratumumab on <b>Days 1, 8, 15 and 22</b>
daratumumab	16 mg/kg	<p><b>Rapid infusion:</b> IV in normal saline 500 mL over 90 minutes on <b>Days 1, 8, 15, and 22:</b> infuse 100 mL over 30 minutes, then infuse the remaining 400 mL over 60 minutes</p> <p>Use 0.2 or 0.22 micron filter</p> <p><i>*Alert: Pharmacy to ensure final volume in bag = 500 mL</i></p> <p><i>*Nursing Alert: IV tubing is primed with daratumumab</i></p>
		<p>Orally once daily on <b>Days 1 to 21</b>, followed by 7 days off Take with or without food. Swallow whole <b>(Self-administered at home)</b></p>
<b>Cycles 3 to 6</b>		
dexamethasone	40 mg	Orally once daily in the morning with food on <b>Days 1, 8, 15 and 22</b> <b>(Self-administered at home)</b>
cetirizine	10 mg	Orally 30 minutes prior to daratumumab on <b>Days 1 and 15</b>
acetaminophen	975 mg	Orally 30 minutes prior to daratumumab on <b>Days 1 and 15</b>

daratumumab	16 mg/kg	<b>Rapid infusion:</b> IV in normal saline 500 mL over 90 minutes on <b>Days 1 and 15:</b> infuse 100 mL over 30 minutes, then infuse the remaining 400 mL over 60 minutes <i>Use 0.2 or 0.22 micron filter</i> <i>*Alert: Pharmacy to ensure final volume in bag = 500 mL</i> <i>*Nursing Alert: IV tubing is primed with daratumumab</i>
lenalidomide	25 mg	Orally once daily on <b>Days 1 to 21</b> , followed by 7 days off Take with or without food. Swallow whole <b>(Self-administered at home)</b>
<b>Cycle 7 and Onwards</b>		
dexamethasone	40 mg	Orally once daily in the morning with food on <b>Days 1, 8, 15 and 22</b> <b>(Self-administered at home)</b>
cetirizine	10 mg	Orally 30 minutes prior to daratumumab on <b>Day 1</b>
acetaminophen	975 mg	Orally 30 minutes prior to daratumumab on <b>Day 1</b>
daratumumab	16 mg/kg	<b>Rapid infusion:</b> IV in normal saline 500 mL over 90 minutes on <b>Day 1:</b> infuse 100 mL over 30 minutes, then infuse the remaining 400 mL over 60 minutes <i>Use 0.2 or 0.22 micron filter</i> <i>*Alert: Pharmacy to ensure final volume in bag = 500 mL</i> <i>*Nursing Alert: IV tubing is primed with daratumumab</i>
lenalidomide	25 mg	Orally once daily on <b>Days 1 to 21</b> , followed by 7 days off Take with or without food. Swallow whole <b>(Self-administered at home)</b>
All doses will be automatically rounded that fall within CCMB Approved Dose Bands. See Dose Banding document for more information		
lenalidomide available dosage strengths: 2.5 mg, 5 mg, 10 mg, 15 mg, 20 mg and 25 mg capsules 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)

### Baseline

- RBC serology (genotyping) mandatory prior to starting daratumumab

### Cycles 1 and 2

#### Day 1

- CBC, serum creatinine, urea, electrolytes, liver enzymes, total bilirubin, albumin and glucose as per Physician Orders
- Serum Protein Electrophoresis (SPEP)/Free Light Chain Ratio (FLCH) (response assessment)

#### Day 15

- CBC

#### Days 8 and 22

- No blood work required

## Cycles 3 to 6

## Day 1

- CBC, serum creatinine, urea, electrolytes, liver enzymes, total bilirubin, albumin and glucose as per Physician Orders
- SPEP/FLCH (response assessment)

## Day 15

- No blood work required

## Cycle 7 and Onwards

## Day 1

- CBC, serum creatinine, urea, electrolytes, liver enzymes, total bilirubin, albumin and glucose as per Physician Orders
- SPEP/FLCH (response assessment)

## Throughout therapy

- TSH every 3 months as per Physician Orders

## daratumumab monitoring

## All Doses

- Full vital signs (temperature, heart rate, respiratory rate, blood pressure and O<sub>2</sub> saturation) at baseline and as clinically indicated
- No observation period is required after daratumumab administration. Patient can be discharged from treatment room if stable whether they had a reaction or not

## Per Reddy2Assist Program – See Additional Information

- Patients of childbearing potential require  $\beta$ HCG according to Reddy2Assist Program requirements

### Recommended Support Medications

Drug	Dose	CCMB Administration Guideline
valACYclovir	500 mg	Orally once daily
acetylsalicylic acid (ASA) enteric coated	81 mg delayed release	Orally once daily
dexamethasone	4 mg	Orally once in the morning the day after daratumumab on <b>Day 3</b> of Cycle 1 only <i>Note: dexamethasone is prescribed to prevent delayed infusion reactions (respiratory)</i>
fluticasone and salmeterol combination	100 mcg – 50 mcg per dose	Prescribed at physician's discretion If patient has a history of asthma or COPD, 1 inhalation twice daily only as needed post daratumumab infusion

## DISCHARGE INSTRUCTIONS

- Patients should be instructed to contact their cancer team immediately if symptoms of hypersensitivity reactions occur after discharge
- lenalidomide and dexamethasone are cancer therapies in this treatment regimen. Remind patient to take lenalidomide and dexamethasone at home
- Remind patient to take recommended support medications at home
- Reinforce applicable safe handling precautions of medications, blood and body fluids for 48 hours after completion of lenalidomide

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## ADDITIONAL INFORMATION

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- daratumumab interferes with cross-matching and red blood cell antibody screening. **Indicate on all Canadian Blood Services requisitions that the patient is on daratumumab**
- daratumumab may interfere with the interpretation of the Serum Protein Electrophoresis (SPEP) results. **Indicate on all immunology (SPEP) requisitions that the patient is on daratumumab**
- Administering nurse must document any infusion-related reactions with any dose of daratumumab
- Consideration may be given to reducing dexamethasone dose at the physician's discretion to 20 mg for patients older than 75 years or for patients with a body mass index of less than 18.5
- 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
- valACYclovir (shingles prophylaxis) continues while on treatment and for 1 month after discontinuation of treatment due to risk of prolonged immunosuppression
- Patients should take therapy to prevent blood clots while on lenalidomide. The majority of patients will be prescribed acetylsalicylic acid (ASA) enteric coated 81 mg once daily. Patients at high risk may be prescribed other anticoagulants instead of acetylsalicylic acid
- All patients should be considered for bisphosphonate therapy
- lenalidomide is teratogenic
- Patients of childbearing potential will require monthly pregnancy tests ( $\beta$ HCG) that must be done within 7 days of the next prescription fill
- **Note: At Cycle 2**, an entry called "**Physician Reminder – dexamethasone dose evaluation**" will appear in the electronic drug order. **No action is required. This prompt is to remind the prescriber to evaluate the dexamethasone dose that begins at Cycle 2**
- lenalidomide can only be given to patients who are registered and meet all conditions of Reddy2Assist Program
- lenalidomide will be dispensed by CCMB Pharmacy