Regimen Reference Order – MYEL – RVd (transplant eligible)

ARIA: MYEL - [RVD (transplant eligible]

Planned Course: Every 28 days for 4 cycles

Indication for Use: Multiple Myeloma, prior to Autologous Stem Cell Transplant

CVAD: Not Required

Proceed with treatment if:

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

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				
D	rug	Dose	CCMB Administration Guideline	
Not Applicable				

Drug	Dose	CCMB Administration Guideline
lexamethasone	40 mg	Orally once daily with food on Days 1, 8, 15 and 22 (Self-administered at home)
bortezomib	1.5 mg/m ²	Subcutaneous once weekly on Days 1, 8, 15 and 22
lenalidomide	25 mg	Orally once daily on Days 1 to 21 , followed by 7 days off Take with or without food. Swallow whole (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, retic, serum creatinine, calcium, liver enzymes, albumin and random glucose as per Physician Orders
- Serum Protein Electrophoresis (SPEP)/Free Light Chain Ratio (FLCH) (response assessment)

Day 15 (Cycles 1 and 2 only)

• CBC as per Physician Orders

Every 3 months

• TSH and HbA1C as per Physician Orders



Reddy2Assist Program - See Additional Information

• Patients of childbearing potential require βHCG according to Reddy2Assist Program requirements

Recommended Support Medications				
Drug	Dose	CCMB Administration Guideline		
acetylsalicylic acid (ASA) enteric coated	81 mg delayed release	Orally once daily		
valACYclovir	500 mg	Orally once daily		
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
- lenalidomide and dexamethasone are cancer therapies in this treatment regimen. Remind patient to take lenalidomide and dexamethasone at home
- Remind patient to take vaLACYclovir (shingles prophylaxis) and ASA (antiplatelet) at home
- bortezomib has potential for drug-drug interactions. Patients should notify clinic prior to starting any new medication
- Advise patient to avoid green tea to prevent interactions with bortezomib
- · Avoid grapefruit and grapefruit juice, Seville oranges (i.e. orange marmalade) and starfruit
- 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
- valACYclovir (shingles prophylaxis) continues during and for 4 weeks after completion of bortezomib due to 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 (βHCG) that must be done within 7 days of the next prescription fill
- lenalidomide can only be given to patients who are registered and meet all conditions of Reddy2Assist Program
- lenalidomide will be dispensed by CCMB Pharmacy

