

Regimen Reference Order

GYNE – bevacizumab + pegylated liposomal doxorubicin

ARIA: GYNE - [bev + doxorubicin (peg-liposomal)]

Planned Course: Every 28 days until disease progression or unacceptable toxicity

Indication for Use: Ovarian Cancer Platinum-Resistant

CVAD: At Provider's Discretion

Proceed with treatment if:

Cycle 1

Day 1 only

- ANC equal to or greater than $1.5 \times 10^9/L$ AND Platelets equal to or greater than $100 \times 10^9/L$

Cycle 2 and Onwards

Day 1 only

- ANC equal to or greater than $1.2 \times 10^9/L$ AND Platelets equal to or greater than $75 \times 10^9/L$

❖ 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 |
|----------------|------|-------------------------------|
| Not Applicable | | |

Treatment Regimen – GYNE – bevacizumab + pegylated liposomal doxorubicin

Establish primary solution 500 mL of: normal saline

| Drug | Dose | CCMB Administration Guideline |
|---|----------|---|
| Day 1 | | |
| bevacizumab (brand name specific) | 10 mg/kg | IV in normal saline 100 mL over 20 minutes <i>*Alert: Ensure brand name on prescription label (indicated in brackets on prescription label) matches prescribed order</i> |
| Establish primary solution 500 mL of: D5W (pegylated liposomal doxorubicin incompatible with normal saline) | | |
| dexamethasone | 8 mg | Orally 30 minutes pre-chemotherapy |

| | | | |
|---|----------------------|---|---|
| doxorubicin, peg-liposomal (pegylated liposomal doxorubicin) | 40 mg/m ² | Dose less than 90 mg: IV in D5W 250 mL | First Dose: Over 90 minutes (Maximum rate 1 mg/minute) |
| | | | Subsequent Doses (if no reaction): Over 1 hour |
| | 40 mg/m ² | Dose greater than or equal to 90 mg: IV in D5W 500 mL | First Dose: Over 2 hours (Maximum rate 1 mg/minute) |
| | | | Subsequent Doses (if no reaction): Over 1 hour |
| Day 15 | | | |
| Establish primary solution 500 mL of: normal saline | | | |
| bevacizumab (brand name specific) | 10 mg/kg | IV in normal saline 100 mL over 20 minutes <i>*Alert: Ensure brand name on prescription label (indicated in brackets on prescription label) matches prescribed order</i> | |
| All doses will be automatically rounded that fall within CCMB Approved Dose Bands. See Dose Banding document for more information | | | |

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)

Days 1

- CBC, serum creatinine, liver enzymes, urine protein and blood pressure as per Physician Orders
 - Urinalysis for protein: Where urinalysis is not possible, use dipstick. If lab urinalysis for protein is greater than or equal to 1 g/L or dipstick proteinuria shows 2+ or 3+, notify prescriber
- Full vital signs (temperature, heart rate, respiratory rate, blood pressure and O₂ saturation) at baseline and as clinically indicated
- No observation period is required after bevacizumab or pegylated liposomal doxorubicin. Patient can be discharged from treatment room if stable whether they had a reaction or not

Day 15

- No blood work required on Day 15
- Full vital signs (temperature, heart rate, respiratory rate, blood pressure and O₂ saturation) at baseline and as clinically indicated
- No observation period is required after bevacizumab administration. Patient can be discharged from treatment room if stable whether they had a reaction or not

Recommended Support Medications

| Drug | Dose | CCMB Administration Guideline |
|----------------|------------|--|
| metoclopramide | 10 – 20 mg | Orally every 4 hours as needed for nausea and vomiting |

DISCHARGE INSTRUCTIONS

- Patients should be instructed to contact their cancer team immediately if symptoms of hypersensitivity reactions occur after discharge
 - Instruct patient to continue taking anti-emetic(s) at home
 - Reinforce applicable safe handling precautions of medications, blood and body fluids for 48 hours after completion of chemotherapy
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ADDITIONAL INFORMATION

- bevacizumab can cause increased risk of hypertension, post-operative bleeding, wound healing complications and thromboembolic events
- 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
- bevacizumab is available from more than one manufacturer and uses several different brand names. Brand name will be indicated in brackets after bevacizumab. **Ensure prescription label matches the brand name on prescribed order**