Regimen Reference Order – GYNE – bevacizumab + topotecan

ARIA: GYNE – [bevacizumab + topotecan]

Planned Course: **Every 21 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

ANC equal to or greater than 1.5 x 10^9/L AND Platelets equal to or greater than 100 x 10^9/L

Cycle 2 and onwards

ANC equal to or greater than 1.2 x 10^9/L AND Platelets equal to or greater than 100 x 10^9/L

- **Contact Physician if parameters not met**

SEQUENCE OF MEDICATION ADMINISTRATION

Pre-treatment Requirements

Drug	Dose	CCMB Administration Guideline
Not Applicable		

Treatment Regimen – GYNE – bevacizumab + topotecan

Establish primary solution 500 mL of: normal saline

Drug	Dose	CCMB Administration Guideline
Day 1		
bevacizumab (brand name specific)	15 mg/kg	IV in normal saline 100 mL over 30 minutes **Alert: Ensure brand name on prescription label (indicated in brackets on prescription label) matches prescribed order* *Concentration dependent drug: Pharmacy will adjust diluent volume to ensure drug stability*
dexamethasone	8 mg	Orally 30 minutes pre-chemotherapy
topotecan	1.25 mg/m^2	IV in normal saline 50 mL over 30 minutes
Days 2 to 5		
dexamethasone	8 mg	Orally 30 minutes pre-chemotherapy
topotecan	1.25 mg/m^2	IV in normal saline 50 mL over 30 minutes

All doses will be automatically rounded that fall within the DSG Approved Dose Bands. See GYNE DSG – Dose Banding document for more information

Flush after each medication:

- 50 mL over 6 minutes (500 mL/hr)

In the event of an infusion-related hypersensitivity reaction, refer to the '**Hypersensitivity Reaction Standing Order'**

REQUIRED MONITORING

All Cycles

- 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 O_2 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

ADDITIONAL INFORMATION

- bevacizumab can cause increased risk of hypertension, post-operative bleeding, wound healing complications and thromboembolic events
- 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**