

Indication	Non-Hodgkins Lymphoma
Treatment Intent	Curative
Frequency and number of cycles	Repeat every 14 days Maximum of 6 cycles
Monitoring Parameters pre-treatment	<ul style="list-style-type: none"> • Pre-Doxorubicin ECG check. • FBC, U&Es and LFTs each cycle. • Blood pressure cycle one and as clinically indicated. • <u>Haematological Toxicity:</u> • Neutrophils < 1.0 x 10⁹/L and / or platelets < 80 x 10⁹/L, delay chemotherapy by up to one week. After first neutropenic event, prophylactic GCSF should be given with subsequent cycles. For continued neutropenia even with GCSF support, reduce cyclophosphamide and doxorubicin. • <u>Renal Impairment:</u> • Cyclophosphamide: CrCl 10–20 mL/min give 75%; CrCl < 10mL/min give 50% • <u>Hepatic Impairment:</u> • Vincristine: bilirubin 26-51µmol/L or AST/ALT 60-180 units/L give 50%, bilirubin >51µmol/L and AST/ALT normal give 50%, bilirubin >51µmol/L and AST/ALT > 180 units/L omit. • Doxorubicin: If AST 2-3 x ULN give 75%, bilirubin 20-51µmol/L or AST >3 x ULN give 50%, bilirubin 52-85µmol/L give 25%, bilirubin >85µmol/L omit. • Neurotoxicity - Grade 2 motor and Grade 3 sensory toxicity give Vincristine 50% dose or Vinblastine 4-6mg/m². • Maximum cumulative dose of Doxorubicin = 450-550mg/m². Check previous exposure to anthracyclines. • <u>Drug Interactions:</u> Doxorubicin: Ciclosporin increases concentration of doxorubicin.
References	KMCC proforma HAEM-NHL-007v3 SPC accessed online 03/1019 BNF accessed online 04/10/19

NB For funding information, refer to CDF NICE Drugs Funding List

Protocol No	HAEM-NHL-007	Kent and Medway SACT Protocol Disclaimer: No responsibility will be accepted for the accuracy of this information when used elsewhere.	
Version	V4	Written by	M.Archer
Supersedes version	V3	Checked by	H.Paddock P.Chan
Date	05.10.2022	Authorising consultant (usually NOG Chair)	C.Wykes

Repeat every 14 days.

Day	Drug	Dose	Route	Infusion Duration	Administration
Day 1	Ondansetron	<75yrs 16mg >=75yrs 8mg	IV	15 min	In NaCl 0.9% 50ml.
	Prednisolone	100mg	PO	Stat	OM
	VINCRIStINE	1.4mg/m² Max 2mg	IV	5-10min	In NaCl 0.9% 50ml.
	DOXORUBICIN	50mg/m²	IV	bolus	Through the side of a fast running NaCl 0.9% infusion.
	CYCLOPHOSPHAMIDE	750mg/m²	IV	bolus	Doses <=1500mg give through the side of a fast running Sodium Chloride 0.9% infusion. For doses >1500mg give in 250-500ml NaCl over 30-60mins.
TTO	Drug	Dose	Route	Directions	
Day 1	Non e.c. Prednisolone	100mg	PO	OM days 2-5	
	Omeprazole	20mg	PO	OD	
	Metoclopramide	10mg	PO	TDS PRN 3 days. Do not take for more than 5 days continuously.	
	Allopurinol	300mg	PO	OD for first cycle only	
	Chlorhexidine mouthwash	10ml	Topical	QDS for 2 weeks - rinse mouth for at least one minute	
	Filgrastim	5µg/kg	SC	OD days (... to ...) (only if needed)	
	Aciclovir	400mg	PO	BD	

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