

**HyperCVAD Maintenance for NHL and ALL:**  
**Mercaptopurine, Methotrexate, Vincristine, Prednisone (POMP)**

**Contact Physician:** \_\_\_\_\_ **Pager:** \_\_\_\_\_

**Diagnosis:** \_\_\_\_\_

**Maintenance: Start date = \_\_\_\_\_, Month \_\_\_\_ Cycle 1: consent form done**

**Weight:** \_\_\_\_\_ **Height:** \_\_\_\_\_ **BSA:** \_\_\_\_\_

**Adjusted IBW:** \_\_\_\_\_ **Adjusted BSA:** \_\_\_\_\_

**Allergies:** \_\_\_\_\_

Maintenance therapy continues for 2 years

**6-Mercaptopurine** 150mg PO daily

**Methotrexate** 20mg/m<sup>2</sup> PO weekly

**Vincristine** 2 mg IV monthly

**Prednisone** 200 mg PO daily times 5 days every month with vincristine

Maintenance therapy for Ph+ patients:

**Imatinib mesylate** 600mg PO daily

**Vincristine** 2mg IV monthly

**Prednisone** 200mg PO daily for 5 days every month with vincristine

**1. Hydration:** Sodium Chloride 0.9% IV as needed with vincristine

**2. Prophylactic medications:**

Acyclovir: 400mg PO twice daily

TMP/Sulfa: 80/400mg 2 tablets PO twice daily every Sat/Sun

Antifungal:

GI prophylaxis:

Recommend Acyclovir and TMP/Sulfa for first six months.

**3. Anti-emetics:** (check the appropriate medications)

- Lorazepam: 0.5mg - 1 mg PO or IV every 4 hours prn nausea
- Prochlorperazine 10mg PO every 6 hours prn nausea.

**4. Chemotherapy for Philadelphia chromosome negative patients**

- 6-Mercaptopurine** 150mg PO daily (on empty stomach)
- Methotrexate** (20mg/m<sup>2</sup>) \_\_\_\_\_mg PO weekly
- VinCRISTine** 2mg slow IV push monthly, to be given on day\_\_\_\_\_.
- Prednisone** 200mg PO daily times 5 days every month with vincristine.  
Days 1-5 = \_\_\_\_ to \_\_\_\_.

**5. Chemotherapy for Philadelphia chromosome positive patients**

- VinCRISTine** 2mg slow IV push monthly, to be given on day\_\_\_\_\_.
- Prednisone** 200mg PO daily times 5 days every month with vincristine.  
Days 1-5 = \_\_\_\_ to \_\_\_\_.
- Imatinib mesylate** 600mg PO daily

Signed: \_\_\_\_\_ Pager: \_\_\_\_\_

JCO 18(3) 2000: 547-561 (ALL protocol); Blood 103(12) 2004: 4396-4407 (Ph+ protocol); Blood 104(6) 2004: 1624-1630 (LB protocol).

**Addendum: Dose Adjustments**

- **Methotrexate:** For moderate toxicity reduce 25%, for severe toxicity reduce by 50% (For mucositis and hepatic dysfunctions, methotrexate generally reduced selectively before 6-MP.)

- **6-Mercaptopurine:** For moderate toxicity reduce by 25%, for severe toxicity reduce by 50%.
- **Vincristine:** Monitor for neuropathy, consider reduction if present. If bilirubin greater than 2mg/dL, reduce to 1mg. For bilirubin >3mg/dL, or grades 3-4 neuropathy , or ileus, eliminate.
- **Imatinib mesylate** reduce to 400mg for grades 3-4 hepatotoxicity.

