STANDARD BFM: Maintenance for Acute Lymphocytic Leukemia

Contact Physician:______________________ **Pager:** ________

Diagnosis:_________________________________

Cycle: Maintenance Start of maintenance_________

Weight:__________ **Height**:__________ **BSA**:_______

Adjusted IBW:____________ **Adjusted BSA**:________

Allergies:_________________________________

Begin day 50 from start of phase IV or when ANC >1000 and platelets>100K
Vincristine 1.5 mg/m^2 (max 2 mg) IV days 1,29,57(monthly times 3 doses)
Prednisone 40 mg/m^2 PO daily for 5 days every 4 weeks (1-5,29-33,57-61)
Methotrexate 12 mg IT day 1
Hydrocortisone 30 mg IT may be given with IT MTX
Methotrexate 20 mg/m^2 PO weekly beginning day 8 (for 11 weeks)
6- Mercaptopurine 75 mg/m^2 PO daily days 1-84
Repeat maintenance cycle starting day 85, continue for 2 years.
Imatinib 400-600mg PO daily for Ph+ chromosome.

1. **Prophylactic Medications:** (check the appropriate medications)
   - ☐ Acyclovir: 400mg PO twice daily
   - ☐ TMP/Sulfa: 160/800mg 1 tablets PO twice daily every Sat/Sun
   - ☐ Antifungal:
   - ☐ Senokot S: 2 tablets PO daily
   - ☐ GI prophylaxis:

2. **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

3. **Chemotherapy:** Begin when ANC > 1000 and platelets > 100,000
   - **Intrathecal methotrexate** 12 mg IT on day 1 _______.
   - ☐ **Intrathecal hydrocortisone** 30 mg IT on day 1 _______
     (complete triplicate IT chemotherapy form)

   - **Prednisone** (40 mg/m^2/day) _______ mg PO daily days 1-5 every month.
     Days 1-5 ___________
     Days 29-33 ___________
     Days 57-61 ___________

   - **Vincristine** (1.5 mg/m^2) _______ mg (maximum 2 mg) IV on
     Day 1 _______
     Day 29 _______
     Day 57 _______

   - **6- Mercaptopurine** (75 mg/m^2/day) ________ mg PO daily,
     days 1-84 _______ (12 weeks) Note: Available as 50mg tablet.

   - **Methotrexate** (20 mg/m^2) ______ mg PO weekly times 11 weeks starting
     days 8 _____, 15 _____, 22_____,29______, 36_______, 43______,
     50______, 57______, 64______, 71_____, 78_____ .
     Note: Use 2.5mg tablets.
   - ☐ **Imatinib** _____mg PO daily for Philadelphia positive chromosome.

Signed:___________________________________ **Date:**____________

Reference: J Clin Oncology 11(11) 2234-2242.

<u>**Recommended dose adjustments:**</u>

1. <u>6-Mercaptopurine</u>

- Concomitant allopurinol- reduce mercaptopurine dose to 1/3 to ¼ of usual dose.
- Hepatic and renal insufficiency: dosage reduction recommended, specific guidelines are not available

2. <u>Methotrexate</u>

- Renal impairment GFR 10-50mL/min give 50% of the usual dose
- Hepatic impairment
  Bilirubin <3 AST <180IU 100% of dose may be given
  Bilirubin 3.1-5 AST >180IU 75% of dose
  Bilirubin >5 omit dose