Regimen Reference Order

MYEL – DRd (SUBCUTANEOUS daratumumab injection)

ARIA: MYEL - [DRd (SUBCUT)]

Planned Course: **Until disease progression or unacceptable toxicity (1 cycle = 28 days)**
Indication for Use: **Multiple Myeloma: First Line (Transplant Ineligible) OR Relapsed/Refractory**
CVAD: At Provider's Discretion

Proceed with treatment if:

lenalidomide:

Day 1 of every cycle & Day 15 of Cycles 1 and 2

- ***ANC equal to or greater than 1 x 10^9/L AND Platelets equal to or greater than 30 x 10^9/L***

daratumumab:

- ***On Day 1, proceed with daratumumab only when lenalidomide starts***
- ***On subsequent treatment days, proceed with daratumumab regardless of CBC***
  - ❖ **Contact Hematologist if parameters not met**

SEQUENCE OF MEDICATION ADMINISTRATION

Pre-treatment Requirements

Drug	Dose	CCMB Administration Guideline
Not Applicable		

Treatment Regimen – MYEL – DRd (SUBCUTANEOUS daratumumab injection)

Establish primary solution 500 mL of: normal saline

Drug	Dose	CCMB Administration Guideline	
Cycle 1			
cetirizine	10 mg	Orally **1 hour** prior to daratumumab on **Days 1, 8, 15 and 22**	
acetaminophen	975 mg	Orally **1 hour** prior to daratumumab on **Days 1, 8, 15 and 22**	
montelukast	10 mg	Orally **1 hour** prior to daratumumab on **Day 1 ONLY**	
dexamethasone	20 mg	**Day 1**	IV in normal saline 50 mL over 15 minutes **1 hour** prior to daratumumab **Nursing Alert: daratumumab starts **1 hour after completion** of dexamethasone*
	20 mg	**Days 8, 15 and 22**	Orally **1 hour** prior to daratumumab

If applicable, wait 1 hour after completion of IV pre-medication(s) before starting daratumumab

daratumumab (Subcutaneous)	1800 mg (1800 mg = 15 mL)	**Subcutaneous:** Administer over 3 to 5 minutes into abdomen on **Days 1, 8, 15 and 22** Remove vial from refrigerator 30 minutes prior to preparing dose to bring to ambient temperature (15°C to 30°C) Use 23G needle **Nursing Alert:* *Ensure subcutaneous daratumumab formulation is used (daratumumab-hyaluronidase)* **Nursing Alert:* *A 3-hour observation period is required after first dose (Day 1 only) if patient has never previously received daratumumab*
lenalidomide	25 mg	Orally once daily on **Days 1 to 21**, then 7 days off Take with or without food. Swallow whole **(Self-administered at home)**
dexamethasone	20 mg	Orally once daily in the morning with food on **Days 2, 9, 16 and 23** **(Self-administered at home)**
Cycle 2		
dexamethasone	40 mg	Orally once daily in the morning with food on **Days 1, 8, 15 and 22** **(Self-administered at home)**
cetirizine	10 mg	Orally 30 minutes prior to daratumumab on **Days 1, 8, 15 and 22**
acetaminophen	975 mg	Orally 30 minutes prior to daratumumab on **Days 1, 8, 15 and 22**
daratumumab (Subcutaneous)	1800 mg (1800 mg = 15 mL)	**Subcutaneous:** Administer over 3 to 5 minutes into abdomen on **Days 1, 8, 15 and 22** Remove vial from refrigerator 30 minutes prior to preparing dose to bring to ambient temperature (15°C to 30°C) Use 23G needle **Nursing Alert:* *Ensure subcutaneous daratumumab formulation is used (daratumumab-hyaluronidase)*
lenalidomide	25 mg	Orally once daily on **Days 1 to 21**, then 7 days off Take with or without food. Swallow whole **(Self-administered at home)**
Cycles 3 to 6		
dexamethasone	40 mg	Orally once daily in the morning with food on **Days 1, 8, 15 and 22** **(Self-administered at home)**
cetirizine	10 mg	Orally 30 minutes prior to daratumumab on **Days 1 and 15**
acetaminophen	975 mg	Orally 30 minutes prior to daratumumab on **Days 1 and 15**
daratumumab (Subcutaneous)	1800 mg (1800 mg = 15 mL)	**Subcutaneous:** Administer over 3 to 5 minutes into abdomen on **Days 1 and 15** Remove vial from refrigerator 30 minutes prior to preparing dose to bring to ambient temperature (15°C to 30°C) Use 23G needle **Nursing Alert:* *Ensure subcutaneous daratumumab formulation is used (daratumumab-hyaluronidase)*

lenalidomide	25 mg	Orally once daily on **Days 1 to 21**, then 7 days off Take with or without food. Swallow whole **(Self-administered at home)**
Cycle 7 and Onwards		
dexamethasone	40 mg	Orally once daily in the morning with food on **Days 1, 8, 15 and 22** **(Self-administered at home)**
cetirizine	10 mg	Orally 30 minutes prior to daratumumab on **Day 1**
acetaminophen	975 mg	Orally 30 minutes prior to daratumumab on **Day 1**
daratumumab (Subcutaneous)	1800 mg (1800 mg = 15 mL)	**Subcutaneous:** Administer over 3 to 5 minutes into abdomen on **Day 1** Remove vial from refrigerator 30 minutes prior to preparing dose to bring to ambient temperature (15°C to 30°C) Use 23G needle **Nursing Alert: Ensure subcutaneous daratumumab formulation is used (daratumumab-hyaluronidase)*
lenalidomide	25 mg	Orally once daily on **Days 1 to 21**, then 7 days off Take with or without food. Swallow whole **(Self-administered at home)**
All doses will be automatically rounded that fall within CCMB Approved Dose Bands. See Dose Banding document for more information		
lenalidomide (REVLIMID®) available dosage strengths: 2.5 mg, 5 mg, 10 mg, 15 mg, 20 mg and 25 mg capsules **Classification: Cytotoxic, Hazardous**		

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

REQUIRED MONITORING

Baseline

- RBC serology (genotyping) mandatory prior to starting daratumumab
- Hepatitis B serology

Cycles 1 and 2

Day 1

- CBC, serum creatinine, urea, electrolytes, liver enzymes, total bilirubin, albumin and glucose as per Physician Orders
- Serum Protein Electrophoresis (SPEP)/Free Light Chain Ratio (FLCH) (response assessment)

Day 15

- CBC

Days 8 and 22

- No blood work required

Cycles 3 to 6

Day 1

- CBC, serum creatinine, urea, electrolytes, liver enzymes, total bilirubin, albumin and glucose as per Physician Orders
- SPEP/FLCH (response assessment)

Day 15

- No blood work required

Cycle 7 and Onwards

Day 1

- CBC, serum creatinine, urea, electrolytes, liver enzymes, total bilirubin, albumin and glucose as per Physician Orders
- SPEP/FLCH (response assessment)

Throughout therapy

TSH every 3 months as per Physician Orders

daratumumab (subcutaneous injection) monitoring

Cycle 1, Day 1

- Full vital signs (temperature, heart rate, respiratory rate, blood pressure and O_2 saturation) at baseline and as clinically indicated
- Observe patient for **3 hours** after administration if patient has never previously received daratumumab. Full vital signs prior to discharge

Cycle 1, Day 8 and Onwards

- 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 subcutaneous daratumumab administration if patient tolerated previous doses of subcutaneous daratumumab

Per RevAid Program or Reddy2Assist Program – See Additional Information

- Patients of childbearing potential require βHCG according to RevAid Program/Reddy2Assist Program requirement

Recommended Support Medications

Drug	Dose	CCMB Administration Guideline
valACYclovir	500 mg	Orally once daily
acetylsalicylic acid (ASA) enteric coated	81 mg delayed release	Orally once daily
fluticasone and salmeterol combination	100 mcg – 50 mcg per dose	Prescribed at physician's discretion If patient has a history of asthma or COPD, 1 inhalation twice daily only as needed post daratumumab injection

DISCHARGE INSTRUCTIONS

- Patients should be instructed to contact their cancer team immediately if symptoms of hypersensitivity reactions occur after discharge
- lenalidomide and dexamethasone are cancer therapies in this treatment regimen. Remind patient to take lenalidomide and dexamethasone at home
- Remind patient to take recommended support medications at home
- Reinforce applicable safe handling precautions of medications, blood and body fluids for 48 hours after completion of lenalidomide

ADDITIONAL INFORMATION

- daratumumab interferes with cross-matching and red blood cell antibody screening. **Indicate on all Canadian Blood Services requisitions that the patient is on daratumumab**
- daratumumab may interfere with the interpretation of the Serum Protein Electrophoresis (SPEP) results. **Indicate on all immunology (SPEP) requisitions that the patient is on daratumumab**
- Administering nurse must document any infusion-related reactions with any dose of daratumumab
- Consideration may be given to reducing dexamethasone dose at the physician's discretion to 20 mg for patients older than 75 years or for patients with a body mass index of less than 18.5
- valACYclovir (shingles prophylaxis) continues while on treatment and for 1 month after discontinuation of treatment due to risk of prolonged immunosuppression
- Patients should take therapy to prevent blood clots while on lenalidomide. The majority of patients will be prescribed acetylsalicylic acid (ASA) enteric coated 81 mg once daily. Patients at high risk may be prescribed other anticoagulants instead of acetylsalicylic acid
- All patients should be considered for bisphosphonate therapy
- lenalidomide is teratogenic
- Patients of childbearing potential will require monthly pregnancy tests (βHCG) that must be done within 7 days of the next prescription fill
- Effective November 25th, 2021, all ***new* patients** starting on lenalidomide will be enrolled in Reddy2Assist Program and lenalidomide will be dispensed by CCMB Pharmacy. lenalidomide can only be given to patients who are registered and meet all conditions of Reddy2Assist Program
- Existing patients on lenalidomide (started prior to November 25th, 2021) are currently enrolled in RevAid Program and will continue to have their lenalidomide prescriptions dispensed by the RevAid Registered Pharmacy
- **Note: At Cycle 2**, an entry called **"Physician Reminder – dexamethasone dose evaluation**" will appear in the electronic drug order. **No action is required. This prompt is to remind the prescriber to evaluate the dexamethasone dose that begins at Cycle 2**