Regimen Reference Order

MYEL – DVd (SUBCUTANEOUS daratumumab injection)

ARIA: MYEL - [DVd (SUBCUT)]

Planned Course: **Until disease progression or unacceptable toxicity (1 cycle = 28 days)**
Indication for Use: **Relapsed/Refractory Multiple Myeloma**

CVAD: At Provider's Discretion

Proceed with treatment if:

Day 1

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

- **Contact Hematologist if parameters not met**

SEQUENCE OF MEDICATION ADMINISTRATION

Pre-treatment Requirements

Drug	Dose	CCMB Administration Guideline
Not Applicable		

Treatment Regimen – MYEL – DVd (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*
		Days 8, 15 and 22	Orally **1 hour** prior to daratumumab
bortezomib	1.5 mg/m^2	Subcutaneous injection once weekly on **Days 1, 8, 15 and 22**	

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*
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**
bortezomib	1.5 mg/m^2	Subcutaneous injection once weekly 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)*
Cycles 3 and 4		
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**
bortezomib	1.5 mg/m^2	Subcutaneous injection once weekly 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 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)*
Cycles 5 to 8		
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**
bortezomib	1.5 mg/m^2	Subcutaneous injection once weekly 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 **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)*
Cycle 9* and Onwards		
cetirizine	10 mg	Orally 30 minutes prior to daratumumab on **Day 1**
acetaminophen	975 mg	Orally 30 minutes prior to daratumumab on **Day 1**
dexamethasone	20 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)*
***At physician's discretion, bortezomib may be prescribed Cycle 9 and onwards as maintenance on Days 1 and 15** All doses will be automatically rounded that fall within CCMB Approved Dose Bands. See Dose Banding Document for more information		

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 to 8

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)

Days 8, 15 and 22

- No blood work required

Cycle 9 and Onwards

Day 1

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

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

Recommended Support Medications

Drug	Dose	CCMB Administration Guideline
valACYclovir	500 mg	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

All Cycles

- Patients should be instructed to contact their cancer team immediately if symptoms of hypersensitivity reactions occur after discharge
- Remind patient to take recommended support medications at home

Cycles 1 to 8

- dexamethasone is a cancer therapy in this treatment regimen. Remind patient to take dexamethasone at home
- bortezomib has potential for drug-drug interactions. Patients should notify clinic prior to starting any new medication
- Advise patient to avoid green tea to prevent interactions with bortezomib
- Avoid grapefruit and grapefruit juice, Seville oranges (i.e. orange marmalade) and starfruit
- Reinforce applicable safe handling precautions of medications, blood and body fluids for 48 hours after completion of chemotherapy

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 who have a body mass index of less than 18.5 kg/m^2
- valACYclovir (shingles prophylaxis) continues while on treatment and for 1 month after discontinuation of treatment due to risk of prolonged immunosuppression
- All patients should be considered for bisphosphonate therapy
- **Note: At Cycles 2 and 9**, 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 Cycles 2 and 9**