VENETOCLAX MAINTENANCE

full description

INDICATIONS:

CLL

DOSING:
Venetoclax PO 400mg od continuously
Every 28 days

(If used in combination with Rituximab it is to be allocated separately starting with cycle 1 of maintenance.)

regimen name	VENETOCLAX MAINT
diagnosis	Acute Myeloblastic Leukaemia (AML) , Chronic Lymphatic Leukaemia (CLL) , CLL with 17p deletion or TP53 mutation
version number	3.00

version no	amended date	amended by	summary
1	Tue Oct 17 2017 14:38:18 GMT+0100 (British Summer Time)	[redacted]	
2	Tue Jul 16 2019 14:26:42 GMT+0100 (British Summer Time)	[redacted]	Updated hepatic guidance
3	Fri Apr 29 2022 14 33:43 GMT+0100 (British Summer Time)	[redacted]	Add quantity to be supplied to script

Treatment day: 1 day type: O slots: 2

drug name	route	vehicle	dose	dose calc	infus. time	frequency	duration	start time	line	fluid vol..	fluid calc
critical test:	HB85, HAEMOGLOBIN >85 , range: 85-> 172										
critical test:	PLAT25, PLATELETS > 25 , range: 25-> 600										
critical test:	WBC 2, WBC> 2.0 , range: 2-> 11										
critical test:	NEUT1, NEUTROPH LS > 1 0 , range: 1-> 7.5										
critical test:	CREAT, CREATININE (umol/l) , range: 40-> 135										
critical test:	GFR>30, GFR >30ml/min , range: 30.01-> 125										
critical test:	B L3ULN, BILIRUBIN <3ULN , range: 0-> 63										
critical test:	ALT5ULN, ALT <5ULN , range: 0-> 215										
critical test:	CCA, Corrected Calcium (mmol/L) , range: 2.1-> 2.6										
critical test:	K, POTASSIUM (mmol/L) , range: 3 5-> 5 3										
critical test:	PO4, PHOSPHATE (mmol/l) , range: 0.8-> 1.5										
VENETOCLAX	Oral	None	400 mg	FLAT		od	28 days			0	
note:	Take with or just after food, or a meal at approximately the same time each day. Swallow whole with a full glass of water, do not chew or crush. Avoid grapefruit products, seville oranges & starfruit.										

Treatment day: 28 day type: X slots: 0

drug name	route	vehicle	dose	dose calc	infus. time	frequency	duration	start time	line	fluid vol..	fluid calc
review											

CLINICAL DETAILS

DOSE REDUCTIONS (FOR INFORMATION / ADVICE CONTACT A PHARMACIST)

RENAL IMPAIRMENT:
No dose adjustment is needed for patients with mild or moderate renal impairment (CrCl =30 mL/min and <90 mL/min). Patients with reduced renal function (CrCl <80 mL/min) may require more intensive prophylaxis and monitoring to reduce the risk of TLS at initiation and during the dose-titration phase. Safety in patients with severe renal impairment (CrCl <30 mL/min) or on dialysis has not been established, and a recommended dose for these patients has not been determined. Venclyxto should be administered to patients with severe renal impairment only if the benefit outweighs the risk and patients should be monitored closely for signs of toxicity due to increased risk of TLS

HEPATIC IMPAIRMENT:

No dose adjustment is recommended in patients with mild or moderate hepatic impairment. Patients with moderate hepatic impairment should be monitored more closely for signs of toxicity at initiation and during the dose-titration phase.

A dose reduction of at least 50% throughout treatment is recommended for patients with severe hepatic impairment. These patients should be monitored more closely for signs of toxicity.

BASELINE / ADDITIONAL MONITORING REQUIREMENTS:
Monitor closely for tumour lysis syndrome. Some patients, especially those at greater risk of TLS, may require hospitalisation on the day of the first dose of venetoclax for more intensive prophylaxis and monitoring during the first 24 hours. Hospitalisation should be considered for subsequent dose increases based on reassessment of risk.Patients must ensure they are adequately hydrated.

Dose reduction advice from: SmPC

Regimen Entry		**Pharmacist - PSU Date**	
Regimen		**Pharmacist - QA Date**	
Regimen Verified		**Consultant Date**	
		Medical Director Date	