

Greater Manchester, Lancashire and South Cumbria Strategic Clinical Networks

Chemotherapy Protocol

DRUG REGIMEN

Bleomycin

Indication for use

For use with Bleomycin-Based Electrochemotherapy (ECT)

Regimen

Pre medicate with hydrocortisone IV 100mg

Bleomycin 15,000 units/m² IV bolus over 30-60 seconds

See under 'Cautions/Contraindications' below regarding retreatment

Investigation prior to initiating treatment

FBC, U&Es, clotting, ECG

ECG before treatment depends on the location of the nodules i.e. less important if the nodules are on the limbs and more important if on the trunk. It also depends on the patient's pre-morbid condition i.e. cardiac history, lung function. It is highly recommended in the case of manifest cardiac arrhythmia or previous cardiac event.

Cautions/Contraindications

Where renal/hepatic function are abnormal, treatment is at medic discretion/discussion Patients can be retreated, bleomycin should maximally be given once a week Bleomycin cumulative maximum dose 400,000 units/m², due to risk of lung fibrosis The presence of a pacemaker precludes treatment on the anterior chest wall. Sensitivity to bleomycin or a history of pulmonary fibrosis will preclude administration of bleomycin

Investigations and consultations prior to each cycle

N/A

<u>Acceptable levels for treatment to proceed</u> (if outside these levels defer one week or contact consultant)

Neutrophils > 1.5

Platelets > 100 (if platelets <100 x 10^9 /L then the risk of bleeding versus the benefit of therapy needs to be discussed with patient)

INR <1.5 (An INR>1.5 precludes invasive treatment i.e. needle insertion)

Side Effects

- Nausea/vomiting (low emetogenic risk)
- Neutropenic sepsis (very low risk)
- · Pulmonary fibrosis with increasing doses
- · Vein discomfort/extravasation -
- Allergic reaction

Dose Modification Criteria

N/A

Specific Information on Administration

Allow 8 mins post bleomycin administration (to allow drug to infuse into tissues) before electric pulses start

THIS PROTOCOL HAS BEEN DIRECTED BY <u>DR BOARD</u>, DESIGNATED LEAD CLINICIAN FOR MELANOMA

RESPONSIBILITY FOR THIS PROTOCOL LIES WITH THE HEAD OF SERVICE

DATE June 2015 REVIEW June 2017

VERSION 1