BEVACIZUMAB maintenance

INDICATION (ICD10) C56, C57
Check the most recent Blueteq eligibility criteria before prescribing. Blueteq registration required. (www.england.nhs.uk/publication/national-cancer-drugs-fund-list/)
As MAINTENANCE monotherapy at a dose of 7.5mg/kg for patients with stage III or IV ovarian, fallopian tube or primary peritoneal carcinoma where the following criteria have been met:
2. Bevacizumab at a dose of 7.5mg/Kg is to be used as maintenance monotherapy after completion of 1st line induction chemotherapy in combination with bevacizumab 7.5mg/Kg for previously untreated advanced epithelial ovarian, fallopian tube or primary peritoneal cancer.
3. This application for maintenance bevacizumab monotherapy continues the use of bevacizumab 7.5mg/Kg previously given in combination with 1st line induction chemotherapy.
4. Bevacizumab is to be given as monotherapy for a maximum of 18 cycles in all, this figure including the number of cycles given in combination with 1st line induction chemotherapy.
5. Bevacizumab is to be given at a dose of 7.5mg/Kg every 3 weeks.
6. This dosage of bevacizumab is not licensed in ovarian cancer, this use of bevacizumab must be used within the treating Trust's governance framework. Note: This policy relating to the use of maintenance bevacizumab 7.5mg/Kg is NOT for patients with stage I-III disease who have had optimal debulking
7. When a treatment break is needed of more than 6 weeks beyond the expected cycle length of 3-weekly treatment, I will complete a treatment break approval form to restart treatment, including as appropriate if the patient had an extended break on account of Covid-19.
8. Bevacizumab is to be otherwise used as set out in its Summary of Product Characteristics.

REGIMEN
Day 1 BEVACIZUMAB 7.5mg/kg in 100ml sodium chloride 0.9% IV infusion

Bevacizumab - The initial dose should be administered over 90 minutes, if tolerated well the second infusion may be administered over 60 minutes.
If the 60 minute infusion is well tolerated all subsequent infusions may be administered over 30 minutes.

CYCLE FREQUENCY AND NUMBER OF CYCLES
Bevacizumab every 21 days for up to 12 cycles (ie up to maximum 18 cycles including all the induction doses)

ANTI-EMETICS
Minimal risk day 1

CONCURRENT MEDICATION REQUIRED

Bevacizumab	None

EXTRAVASATION AND TYPE OF LINE / FILTERS
Bevacizumab – neutral

Central or peripheral line

INVESTIGATIONS

Blood results required before SACT administration
FBC, U&E and LFTs, creatinine day 1
Neutrophils x 10^9/L ≥1.0
Platelets x 10^9/L ≥75
GFR assessed using EDTA result or calculated creatinine clearance at the Consultant's discretion.
CA125 baseline and day 1 every cycle
Blood pressure every cycle
Urinalysis for proteinuria every cycle
Baseline weight and every cycle

MAIN TOXICITES AND ADVERSE REACTIONS

Bevacizumab	Arterial thromboembolism Gastrointestinal perforation Haemorrhage Hypertension Wound healing complications

INTERACTIONS WHICH MAY REQUIRE DOSE MODIFICATIONS

(not exhaustive list check SPC/BNF/Stockleys)

Bevacizumab	-

DOSE MODIFICATIONS

Non-haematological

Bevacizumab
Hypertension
Baseline blood pressure should be <150/100mmHg.

Diastolic increase >20mmHg above baseline or BP rises to >150/100mmHg	Antihypertensive therapy may be required.
Blood pressure >180/110mmHg	It is advised that bevacizumab therapy is withheld until blood pressure controlled.

Proteinuria

Urine dipstick result. 1+ or 2+ on dipstick (0.3–2.9g/L)	Continue with bevacizumab. No additional evaluation required.
3+ on dipstick (3-19g/L)	May have dose of bevacizumab as scheduled, but 24 hour urine to measure 24 hour protein to be done a few days before next cycle due. If 24hr protein result <2g, continue with bevacizumab, with continued proteinuria monitoring via 24 hour urine before each dose. If the 24 hour protein level falls to <1g/24hr, return to dipstick analysis. If ≥2g, withhold bevacizumab until repeat 24 hour urine collection shows <2g protein. Then re-introduce bevacizumab, with continued proteinuria monitoring via 24 hour urine.
4+ on dipstick (≥20g/L)	Withhold bevacizumab. 24 hour urine required. Follow 24 hour urine monitoring and guidance as for 3+ on dipstick.

Wound healing
Bevacizumab may adversely affect the wound healing process. Therapy should not be initiated for at least 28 days following major surgery or until the surgical wound is fully healed. Therapy should also be withheld for at least 28–60 days before elective surgery.

REFERENCES
CDF list