

## Palliative Chronic Lymphocytic Leukemia (CLL) Regimens

The following table lists the evidence-informed regimens (both IV and non-IV) for CLL used in the palliative setting. It is expected that the prescribing oncologist will select the regimen from the list of evidence-informed regimens that is most appropriate for their patient taking account of a variety of disease-specific and patient-related factors.

Regimens highlighted in red contain an expensive drug that is not currently publicly funded for the regimen and treatment intent.

Regimens highlighted in blue contain an expensive drug that is not currently publicly funded but where there is a universal compassionate access program in place. The administration of the drug supported by the systemic treatment funding model, but not the cost of drug.

Chronic Lymphocytic Leukemia		
Regimen Code	Regimen Abstract	
BEND	Bendamustine 100 mg/m² IV days 1-2. Q28 days	
CHLO	Dose and frequency may vary, one option is: Chlorambucil 6 mg/m² PO days 1-14. Q28 days  Can be given with or without Prednisone	
CHLO+OBIN	Chlorambucil 0.5 mg/kg PO days 1, 15 of each cycle oBINutuzumab 1000 mg IV days 1, 8, 15 for cycle 1 THEN oBINutuzumab 1000 mg IV day 1 of cycles 2 to 6 (Cycle 1 first dose of oBINutuzumab split over 2 days: 100 mg IV day 1 and 900 mg IV day 2) Q28 days	
CVP	Cyclophosphamide 750 mg/m² IV day 1; vinCRIStine 1.4 mg/m² (max 2 mg) IV day 1; Prednisone 100 mg PO daily, days 1-5. Q21 days	
CVP(PO)	Cyclophosphamide 400 mg/m² PO days 1-5; vinCRIStine 1.4 mg/m² (max 2 mg) IV day 1; Prednisone 100 mg PO daily, days 1-5. Q21 days	
CYCL(PO)	Dose and frequency may vary, two options are: Cyclophosphamide 500 mg PO Weekly Or Cyclophosphamide 50 mg PO daily Can be given with or without Prednisone	



Chronic Lymphocytic Leukemia		
Regimen Code	Regimen Abstract	
DEXA(HD)	Dexamethasone 187.5 mg/m² PO daily for 4 days. Q28 days	
FC	Fludarabine 25 mg/m² IV days 1-3; Cyclophosphamide 250 mg/m² IV days 1-3. Q28 days	
FC(PO)	Fludarbine 25 mg/m <sup>2</sup> PO days 1-5; Cyclophosphamide 150 mg/m <sup>2</sup> PO days 1-5. Q28 days	
FC(PO)+R	Fludarabine 25 mg/m² PO days 1-5 Cyclophosphamide 150 mg/m² PO days 1-5; riTUXimab 375 mg/m² IV (day 1 cycle 1) THEN riTUXimab 500 mg/m² IV (day 1 cycles 2-6). Q28 days	
FC+R	Fludarabine 25 mg/m² IV days 1-3; Cyclophosphamide 250 mg/m² IV days 1-3; riTUXimab 375 mg/m² IV (day 1 cycle 1) THEN riTUXimab 500 mg/m² IV (day 1 cycles 2-6). Q28 days	
FCM	Fludarabine 25 mg/m² IV days 1-3; Cyclophosphamide 200-250 mg/m² IV days 1-3; mitoXANTrone 6 mg/m² IV day 1 ONLY. Q28 days	
FCM+R	Fludarabine 25 mg/m² IV days 1-3; Cyclophosphamide 200-250 mg/m² IV days 1-3; mitoXANTrone 6 mg/m² IV day 1 ONLY; riTUXimab 375 mg/m² IV (day 1 cycle 1) THEN riTUXimab 500 mg/m² IV (day 1 cycles 2-6). Q28 days	
FLUD	Fludarabine 25 mg/m² IV days 1-5. Q28 days	
FLUD(PO)	Fludarabine 40 mg/m² PO days 1-5. Q28 days	
FLUD(PO)+R	Fludarabine 40 mg/m² PO daily days 1- 5; riTUXimab 375 mg/m² IV (day 1 cycle 1) THEN riTUXimab 500 mg/m² IV (day 1 cycles 2-6). Q28 days	
FLUD+R	Fludarabine 25 mg/m² IV days 1-5; riTUXimab 375 mg/m² IV (day 1 cycle 1) THEN riTUXimab 500 mg/m² IV (day 1 cycles 2-6). Q28 days	
IBRU	iBRUtinib 420 mg PO daily	
IDEL+RITU	Idelalisib 150 mg PO BID until disease progression riTUXimab 375 mg/m² IV day 1, week 1	

Chronic Lymphocytic Leukemia		
Regimen Code	Regimen Abstract	
	THEN riTUXimab 500 mg/m <sup>2</sup> IV day 1, weeks 3, 5, 7, 9, 13, 17, 21 (total 8 infusions)	
	Note: **Report as Regimen Code: IDEL after riTUXimab portion is complete**	
MTPR(HD)	Methylprednisolone 1000 mg/m² IV days 1-5 Q28 days	
PRED(HD)	Prednisone 1250 mg/m² PO daily, days 1-5 Q28 days	
ALEM	Week 1: Alemtuzumab 3 mg IV/SC (first dose), 10 mg IV/SC (second dose), 30 mg IV/SC (third dose). Weeks 2 to 13: Alemtuzumab 30 mg IV/SC 3x weekly	
	Use ALEM(IV) in T-Cell Prolymphocytic Leukemia Not publicly funded. Universal compassionate access program available	
ALEM(IV)	Week 1: Alemtuzumab 3 mg IV (first dose), 10 mg IV (second dose), 30 mg IV (third dose) Weeks 2 to 13: Alemtuzumab 30 mg IV 3x weekly	
	For use in T-Cell Prolymphocytic Leukemia Not publicly funded. Universal compassionate access program available	
ALEM+RITU	Week 1: Alemtuzumab 3 mg IV/SC (first dose), 10 mg IV/SC (second dose), 30 mg IV/SC (third dose). Weeks 2 to 13: Alemtuzumab 30 mg IV/SC 3x weekly Not publicly funded. Universal compassionate access program available	
	riTUXimab 375 mg/m <sup>2</sup> IV weekly for 4 weeks. – Not currently publicly funded for this regimen and intent	
BEND+RITU	Bendamustine 90 mg/m² IV days 1-2; – Not currently publicly funded for this regimen and intent RiTUXimab 375 mg/m² IV day 1, cycle 1 – Not currently publicly funded for this regimen and intent RiTUXimab 500 mg/m² IV day 1, cycles 2 to 6 – Not currently publicly funded for this regimen and intent Q28 days	
FCM+ALEM	Fludarabine 25 mg/m² IV days 1-3; Cyclophosphamide 200 mg/m² IV days 1-3; MitoXANTRONE 8 mg/m² IV day 1 Q28 days Alemtuzumab week 1: Alemtuzumab 3 mg IV/SC (first dose), 10 mg IV (second dose), 30 mg IV (third dose) Weeks 2 to 13: Alemtuzumab 30 mg IV/SC 3 x weekly	

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	Not publicly funded. Universal compassionate access program available.	
OFAT	oFAtumumab 300 mg IV day 1 THEN oFAtumumab 2000 mg IV starting week 2, Q7 days x 7 THEN oFAtumumab 2000 mg IV starting week 12 Q28 days x 4 Not publicly funded. Universal compassionate access program available	
VENE	Week 1:  Venetoclax 20 mg PO daily – not currently publicly funded for this regimen and intent;  Week 2:  Venetoclax 50 mg PO daily;  Week 3:  Venetoclax 100 mg PO daily;  Week 4:  Venetoclax 200 mg PO daily;  THEN  Venetoclax 400 mg PO daily.	

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