

Regimen Monograph

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A - Regimen Name

CRBPPEME+BEVA Regimen

CARBOplatin-Pemetrexed-Bevacizumab

Disease Site Lung - Mesothelioma

Intent Palliative

Regimen Category **Evidence-informed :**

Regimen is considered appropriate as part of the standard care of patients; meaningfully improves outcomes (survival, quality of life), tolerability or costs compared to alternatives (recommended by the Disease Site Team and national consensus body e.g. pan-Canadian Oncology Drug Review, pCODR). Recommendation is based on an appropriately conducted phase III clinical trial relevant to the Canadian context OR (where phase III trials are not feasible) an appropriately sized phase II trial. Regimens where one or more drugs are not approved by Health Canada for any indication will be identified under Rationale and Use.

This **Regimen Abstract** is an **abbreviated** version of a Regimen Monograph and contains only top level information on usage, dosing, schedule, cycle length and special notes (if available). Information in regimen abstracts is accurate to the extent of the ST-QBP regimen master listings, and has not undergone the full review process of a regimen monograph. Full regimen monographs will be published for each ST-QBP regimen as they are developed.

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B - Drug Regimen

pemetrexed	500 mg /m ²	IV	Day 1
CARBOplatin	AUC 5	IV	Day 1
bevacizumab	15 mg /kg	IV	Day 1

(This drug is not currently publicly funded for this regimen and intent)

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C - Cycle Frequency**REPEAT EVERY 21 DAYS**

For up to 6 cycles unless disease progression or unacceptable toxicity occurs

May continue with bevacizumab after 6 cycles of chemotherapy, unless disease progression or unacceptable toxicity occurs. Report as BEVA(MNT)

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D - Premedication and Supportive Measures

Antiemetic Regimen: Moderate + NK1 antagonist (Carboplatin AUC ≥ 5)

Other Supportive Care:

Also refer to [CCO Antiemetic Recommendations](#).

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J - Administrative Information

Approximate Patient Visit	2.5 hours
Pharmacy Workload (average time per visit)	33.069 minutes
Nursing Workload (average time per visit)	49.169 minutes

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K - References

Zalcmon G, Mazieres J, Greillier L et al. Bevacizumab for newly diagnosed pleural mesothelioma in the Mesothelioma Avastin Cisplatin Pemetrexed Study (MAPS): a randomised, controlled, open-label, phase 3 trial. *Lancet* 2016;387:1405-14.

PEBC Advice Documents or Guidelines

- [Endorsement of the 2018 ASCO Treatment of Malignant Pleural Mesothelioma Guideline](#)

June 2021 removed "unfunded" flag for pemetrexed

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M - Disclaimer

Regimen Abstracts

A Regimen Abstract is an abbreviated version of a Regimen Monograph and contains only top level information on usage, dosing, schedule, cycle length and special notes (if available). It is intended for healthcare providers and is to be used for informational purposes only. It is not intended to constitute or be a substitute for medical advice, and all uses of the Regimen Abstract are subject to clinical judgment. Such information is provided on an "as-is" basis, without any representation, warranty, or condition, whether express, or implied, statutory or otherwise, as to the information's quality, accuracy, currency, completeness, or reliability, and Cancer Care Ontario disclaims all liability for the use of this information, and for any claims, actions, demands or suits that arise from such use.

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Regimen Monographs

Refer to the [New Drug Funding Program](#) or [Ontario Public Drug Programs](#) websites for the most up-to-date public funding information.

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