

Regimen Monograph

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A - Regimen Name

CYCLVINO Regimen

Cyclophosphamide (oral)-Vinorelbine

Disease Site Sarcoma - Soft Tissue

Intent Adjuvant
Curative

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.

Rationale and Uses For treatment of patients with high risk non-metastatic incompletely resected rhabdomyosarcoma who are in remission after standard chemotherapy

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B - Drug Regimen

vinorelbine	25 mg /m ²	IV	Days 1, 8 and 15
cyclophosphamide	25 mg /m ²	PO	Daily; Days 1 to 28

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C - Cycle Frequency

REPEAT EVERY 28 DAYS

For a usual total of 6 cycles unless disease progression or unacceptable toxicity occurs

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D - Premedication and Supportive Measures

Antiemetic Regimen: Minimal (vinorelbine)
Low – No routine prophylaxis; PRN recommended (oral cyclophosphamide)

Other Supportive Care:

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

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J - Administrative Information

Approximate Patient Visit	0.5 hour
Pharmacy Workload (average time per visit)	16.783 minutes
Nursing Workload (average time per visit)	36.667 minutes

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K - References

Bisogno G, De Salvo GL, Bergeron C, et al. Vinorelbine and continuous low-dose cyclophosphamide as maintenance chemotherapy in patients with high-risk rhabdomyosarcoma (RMS 2005): a multicentre, open-label, randomised, phase 3 trial. *Lancet Oncol* . 2019 Nov;20(11):1566-1575. doi: 10.1016/S1470-2045(19)30617-5.

Cyclophosphamide and vinorelbine drug monographs, Cancer Care Ontario.

February 2021 new ST-QBP regimen

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L - Other Notes

Sarcomas are rare tumours and as such benefit from referral to specialized centres where there will be access to multidisciplinary expertise including good radiology, orthopedic and thoracic surgery, medical oncology, radiation oncology, pathology, and other supportive care disciplines.

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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.

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.

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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The format and content of the drug monographs, regimen monographs, appendices and symptom management information contained in the Formulary will change as they are reviewed and revised on a periodic basis. The date of last revision will be visible on each page of the monograph and regimen. Since standards of usage are constantly evolving, it is advised that the Formulary not be used as the sole source of information. It is strongly recommended that original references or product monograph be consulted prior to using a chemotherapy regimen for the first time.

Some Formulary documents, such as the medication information sheets, regimen information sheets and symptom management information (for patients), are intended for patients. Patients should always consult with their healthcare provider if they have questions regarding any information set out in the Formulary documents.

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