

Regimen Monograph

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A - Regimen Name

CYTA(IT) Regimen

Cytarabine (intrathecal)

Disease Site Hematologic - Lymphoma - Non-Hodgkin's Intermediate Grade

Intent 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.

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.

Rationale and Uses As an alternative to IT or systemic methotrexate

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B - Drug Regimen

cytarabine

50 to 70 mg

IT

for 4 doses*

*schedule and frequency is variable

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C - Cycle Frequency

Frequency is variable. An example is one injection per cycle of systemic treatment as CNS prophylaxis.

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D - Premedication and Supportive Measures

Antiemetic Regimen: Minimal

Other Supportive Care:

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

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J - Administrative Information

Pharmacy Workload (average time per visit) 15.075 minutes

Nursing Workload (average time per visit) 60 minutes

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K - References

Cytarabine drug monograph, Cancer Care Ontario.

National Comprehensive Cancer Network Clinical Practice Guidelines. B-Cell Lymphomas, V3.2017.

Princess Margaret Cancer Centre Clinical Practice Guidelines. Aggressive Lymphoma, October 2015.

May 2019 Updated emetic risk category

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M - Disclaimer

Regimen Abstracts

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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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