

Regimen Monograph

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A - Regimen Name

OPPA-COPP Regimen

Disease Site Hematologic - Lymphoma - Hodgkin

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 This is a paediatric regimen for the treatment of Hodgkin's lymphoma.

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B - Drug Regimen

OPPA cycles 1 and 2:

vinCRISStine	1.5 mg /m ²	IV (maximum 2 mg)	Days 1, 8 and 15
procarbazine	100 mg /m ²	PO	Days 1 to 15
prednisone	60 mg /m ²	PO	Days 1 to 15
DOXOrubicin	40 mg /m ²	IV	Days 1 and 15

COPP cycles 3, 4, possibly 5 and 6 (depending on residual disease):

cyclophosphamide	500 mg /m ²	IV	Days 1 and 8
vinCRISStine	1.5 mg /m ²	IV (maximum 2 mg)	Day 1 and 8
procarbazine	100 mg /m ²	PO	Day 1 to 15
prednisone	40 mg /m ²	PO	Day 1 to 15

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C - Cycle Frequency

REPEAT EVERY 28 DAYS

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

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D - Premedication and Supportive Measures

Antiemetic Regimen: Moderate

Other Supportive Care:

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

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J - Administrative Information

Pharmacy Workload (average time per visit) 25.765 minutes

Nursing Workload (average time per visit) 42.143 minutes

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K - References

Mauz-Körholz C, Hasenclever D, Dörffel W, et al. Procarbazine-free OEPA-COPDAC chemotherapy in boys and standard OPPO-COPP in girls have comparable effectiveness in pediatric Hodgkin's lymphoma: the GPOH-HD-2002 study. J Clin Oncol. 2010 Aug 10;28(23):3680-6.

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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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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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