Guidelines for the use of non-Thames Valley or Nationally approved chemotherapy regimens (including deviations from treatment algorithms) in exceptional circumstances in adults with cancer

**Purpose**
To prevent the regular use of regimens not on PODG approved lists and/or not following agreed treatment algorithms and to provide guidelines for the occasional use of non-Thames Valley approved regimens or treatment which deviates from PODG or nationally agreed algorithms. Nationally agreed algorithms are being developed. As nationally agreed algorithms are approved they will supersede Thames Valley approved algorithms, and must be adhered to.

**Non-Thames Valley approved regimens**

A non-Thames Valley approved chemotherapy regimen is a regimen that has not been approved for use by the appropriate PODG (or is not included in the National algorithms where available).

Non-Thames Valley (Nationally) approved regimens may be used in exceptional circumstances when

- A patient has not responded to or tolerated the regimen(s) approved for that indication and there is clinical evidence that a response may be achieved from another therapy.
- A regimen may show a clinical advantage but has not yet been assessed by the relevant PODG.
- An alternative regimen is more suitable for the patient.

**Deviation from the Thames Valley agreed Tumour site specific (or nationally agreed) chemotherapy treatment algorithms.**

Treatment with an out of sequence or non network approved chemotherapy regime may lead to deviation from the Thames Valley (or National) approved treatment algorithms.

Circumstances where this might be appropriate include:

- A patient has not responded to or tolerated the regimen(s) approved for that indication and there is clinical evidence that a response may be achieved from another therapy.
- A regimen may show a clinical advantage but has not yet been assessed by the relevant PODG.
- An alternative regimen is more suitable for the patient.
Process
The treatment protocol/deviation from algorithm together with supporting documentation (e.g. references and reason for using a non-Thames Valley (Nationally agreed) regimen, including dose reductions and management of side effects etc) must be submitted to the Chair of Local Chemotherapy group for approval (e.g. by full discussion or Chairman’s action). Funding must be identified prior to use of the drug. If the Chair of the local chemotherapy group approves its use, the following information must be supplied to the local Pharmacy:

- regimen to be used
- patient details
- treating consultant
- indication
- reason for using a non-Thames Valley approved regimen and/or deviating from the agreed algorithm
- intended date of treatment
- arrangements for funding (e.g. Cancer Drug fund)

Process for the addition of a non-Thames Valley (or nationally) approved regimen on to Aria

1. The requesting consultant completes the request form ensuring that all information required is completed (http://tvscn.nhs.uk/networks/cancer/cancer-topics/chemotherapy/)
2. Send the form to the Thames Valley e-prescribing pharmacist.
3. Thames Valley e-prescribing pharmacist will enter the regimen onto Aria allowing access to only those institutions and clinicians necessary.
4. The pharmacist entering the regimen will complete a pharmacy check on the regimen and approve the regimen for testing having made any alterations necessary.
5. The Thames Valley e-prescribing pharmacist will set up the dummy patients to enable clinician checking.
6. The requesting clinician will be informed as soon as the regimen is ready for clinician checking.
7. Once the clinician has completed the clinician check of the regimen and returned the Clinician checklist, the Thames Valley e-prescribing pharmacist will make any necessary alterations, get the regimen on Aria second pharmacist checked and approve for use.

These details must be recorded by the pharmacy department and supplied to the Lead Cancer Pharmacist Thames Valley every 3 months. These will then be reviewed by the Thames Valley Chemotherapy crosscutting group.

Future use of non-Thames Valley approved protocols
Non-Thames Valley or nationally approved protocols/deviation from algorithm may be used for 3 patients (unless your Trust specifies less) in exceptional circumstances.