



Intervention Plan

PGTM - Clinical Intervention Model (CIM):

Prescribing and use of rituximab as maintenance therapy for follicular lymphoma in Quebec's university teaching hospitals

Background: Undertake concerted actions at the provincial level (specific interventions) regarding the prescribing and use of rituximab as maintenance therapy for follicular lymphoma. Institute measures that will apply to all five of Quebec's university teaching hospitals (UTHs) (a PGTM rituximab CIM).

Decision of the PGTM's Executive Committee following the report entitled *Rituximab (Rituxan^{MD}) dans le traitement de maintien des patients ayant un lymphome non hodkinien de type folliculaire* (Rituximab (Rituxan[®]) as maintenance therapy in patients with follicular non-Hodgkin's lymphoma):

Preference should be given to the dosage regimen of 375 mg/m² every 3 months as maintenance therapy for follicular lymphoma following first-line therapy or therapy for refractory or recurrent disease. Patients must have responded (partial or complete response) to induction therapy and must have an Eastern Cooperative Oncology Group (ECOG) performance status score of ≤ 2 and a life expectancy of at least 6 months.

Objective: To inform prescribers (if need be) so that rituximab as maintenance therapy is administered every 3 months in Quebec's UTHs.

Intervention measures: Each institution is to determine which interventions apply to its situation and make one or more of them priorities.

Timetable for implementing measures: Within 12 months, commencing with March 2014. There will be an update in the spring of 2014.

Intervention plan for the PGTM's rituximab CIM:

1. Document current use in each UTH.

Review the records of rituximab maintenance therapy from the last 12 months (September 2012 to September 2013) to determine the number of patients and the dosage used in these patients, using pharmacy order entry software and by consulting the clinical records, if necessary.

2. Calculate the potential savings at each UTH.

3. Present the recommendation and/or the results for the past 12 months to the Oncology Subcommittee (where applicable) and the Pharmacy and Therapeutics Committee.

4. Have the Pharmacy and Therapeutics Committee circulate a reminder notice detailing the PGTM's recommendation.

5. Create a preprinted prescription form containing guidance on prescribing rituximab maintenance therapy.

6. Carry out a post-intervention drug utilization review (DUR) to evaluate the measure's acceptability and implementation.

7. After the DUR, if necessary, send a written, personalized report to the prescribing physicians reminding them of the PGTM's recommendation.

8. Meet with the Department of Hematology/Oncology personnel to discuss the preferred dosage.

Le pGTm est une initiative des cinq centres hospitaliers universitaires du Québec