PRODUCT UPDATE

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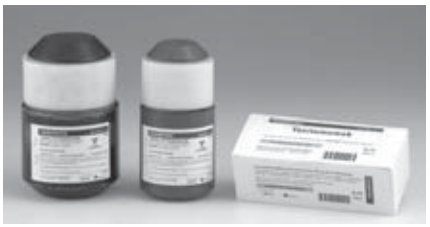
New Treatment Approved for Relapsed Follicular Non-Hodgkin's Lymphoma Refractory to Rituximab



GlaxoSmithKline and Corixa Corporation have announced the U.S. Food and Drug Administration's approval of the Bexxar® (tositumomab and iodine-131 tositumomab) therapeutic regimen. This regimen is complicated and requires physicians to complete a training program before administering the drug. Tositumomab has been approved for patients with CD20-positive follicular non-Hodgkin's lymphoma that has relapsed after chemotherapy and is refractory to rituximab. This regimen has demonstrated durable remissions in some patients with a single, short course of therapy.

The tositumomab regimen involves at least four patient visits. The initial visits include a tositumomab infusion to help distribute the radioactive dose followed by iodine-131 tositumomab as a dosimetric dose. Patients then receive several whole body scans over several days to determine the distribution and decay of the radioactive dose. The fourth patient visit includes the therapeutic dose of iodine-131 tositumomab. By following this regimen, patients are given individualized treatment that is specific to their own patterns of radiation distribution and clearance of the drug and radiation. The tositumomab monoclonal antibody attaches to the CD20 protein on the surface of lymphocytes. This allows the drug to target the malignant cells and deliver the radiation dose directly to the tumor. After treatment, patients need to follow safety precautions to prevent low-level radiation exposure to family members and avoid close contact with others for about one week.

Common adverse effects of this regimen include neutropenia, thrombocytopenia, and/or anemia that could be severe; allergic reactions; and secondary leukemia and myelodysplasia. Less common but severe side effects can include pneumonia, pleural effusions, and dehydration. Additional adverse reactions seen in clinical trials were infusion reactions, delayed-onset hypothyroidism, and the development of human anti-mouse antibodies. More information can be found at www.bexxar.com or by calling 877-4-BEXXAR.

New Treatment Prevents Chemotherapy-Related Nausea and Vomiting

Aloxi™ (palonosetron hydrochloride) is a 5-HT_3 receptor antagonist that has strong receptor-binding affinity and a long plasma half-life (approximately 40 hours). Palonosetron is indicated for the prevention of chemotherapy-induced nausea and vomiting. Clinical trials have demonstrated that a single dose of palonosetron can provide up to 120 hours of prevention for nausea and vomiting. Palonosetron is the only single-dose 5-HT_3 receptor antagonist that is indicated for the prevention of delayed nausea and vomiting following moderately emetogenic chemotherapy. The primary side effects of the drug are similar to other 5-HT_3 receptor antagonists and include headache and constipation. The drug should be administered with caution in patients who have or may develop prolongation of cardiac conduction intervals. Helsinn Healthcare SA developed the drug, but it is licensed and will be distributed by MGI Pharma in the United States. Full prescribing information is available at www.mgipharma.com, or call 800-562-0679 to contact your local MGI representative.

Gefitinib Leads New Class of Drugs for Non-Small Cell Lung Cancer

Gefitinib is the first in a new class of drugs for the treatment of advanced non-small cell lung cancer and the only approved treatment for patients who already have received platinum-based and docetaxel chemotherapy. Gefitinib is a monotherapy for patients with locally advanced or metastatic non-small cell lung cancer and is administered as a once-a-day oral tablet. Gefitinib works by inhibiting epidermal growth factor receptors.

The most common adverse effects of gefitinib include diarrhea, dehydration, rash, acne, dry skin, nausea, and vomiting. Uncommon but serious adverse effects include drug reactions and interstitial lung disease, which can be fatal. Several potential drug interactions are noted, and full drug information should be reviewed before prescribing this drug. For more information, call the AstraZeneca Cancer Support Network at 866-99-AZCSN or visit www.astrazeneca-us.com.

Bevacizumab Receives Fast-Track Status for Use With Colorectal Cancer

Bevacizumab (Avastin™, Genentech Inc., South San Francisco, CA) is an investigational therapeutic antibody that can inhibit tumor angiogenesis. Bevacizumab is designed to block vascular endothelial growth factor (VEGF), thereby decreasing the formation of new blood vessels to support tumor growth and inhibiting maintenance of existing tumor blood vessels.

The U.S. Food and Drug Administration's fast-track program is designed to encourage the development of drugs that are intended to treat life-threatening illnesses that have limited treatment options available. Bevacizumab has been granted fast-track status for the treatment of previously untreated first-line metastatic colorectal cancer.

Bevacizumab currently is being used in several phase II and III studies with many different tumor types. A recently completed phase III study demonstrated that bevacizumab was able to improve survival in patients with metastatic colorectal cancer. For more information, visit www.gene.com or www.clincaltrials.gov or call 888-662-6728.

NEW PRODUCTS

New Urine Test Will Aid in Bladder Cancer Screening

NMP22® Bladder Chek™ (Cytogen Corporation, Princeton, NJ) is the first screening test approved for the diagnosis and monitoring of bladder cancer. The test is very simple to use. A patient voids into a plastic cup. The test must be performed within two hours of obtaining the urine sample. Four drops of urine are placed on the test cartridge using a dropper that is included in the kit. The test is read after 30 minutes but no

Description of products does not indicate or imply endorsement by the Oncology Nursing Forum *or the Oncology Nursing Society.*

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