

Thames Valley Strategic Clinical Network

Cytarabine INTRATHECAL

INDICATION

CNS prophylaxis and treatment for patients with lymphoma. Note: A liposomal preparation and separate protocol is available.

ALL INTRATHEACAL DRUGS TO BE ADMINISTERED IN ACCORDANCE WITH NATIONAL GUIDANCE AND LOCAL POLICY

TREATMENT INTENT

Curative or disease modification depending on context.

PRE-ASSESSMENT

- Blood tests FBC, coagulation screen.
- Stop/withhold anticoagulation.
- If platelets <40x10⁹/L give 1-2 pools of platelets (depending on prior platelet increments) just before/during procedure. Correct any coagulation abnormality.
- Need for CNS prophylaxis or treatment should have been agreed in MDT.

DRUG REGIMEN

Day 1 CYTARABINE 70 mg INTRATHECAL.

Allow drug to reach room temperature before administering.

CYCLE FREQUENCY

Dependent on concurrent chemotherapy regimen.

RESTAGING

For CNS treatment, continue at least weekly until CSF clear.

DOSE MODIFICATIONS

Schedule may need modification if the platelet count is very low or coagulation is abnormal. Renal/Hepatic impairment: no dose adjustment needed for intrathecal administration of a low-dose.

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Intrathecal	Dr. Graham Collins	Reviewed:	July 2021	3.7
CYTARABINE	Date: May 2018	Review:	May 2023	



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INVESTIGATIONS

FBC – aim for platelet count of > 40×10^9 /L.

CONCURRENT MEDICATION

See individual treatment protocol.

EMETIC RISK

Minimal.

ADVERSE EFFECTS

- Arachnoiditis; headache, back pain, neck stiffness and fever, rarely leukoencephalopathy.
- Care should be taken if radiotherapy is given during or after intrathecal cytarabine therapy as it can exacerbate toxicity.

TREATMENT RELATED MORTALITY

<1%

REFERENCES

- 1. Department of Health (2008) Updated national guidance on the safe administration of intrathecal chemotherapy, Health Service Circular, HSC 2008/001.
- 2. National Patient Safety Agency (2008) Using vinca alkaloid minibags (Adult/Adolescent units) Rapid response report NPSA/2008/RRR004.
- 3. British Committee for Standards in Haematology- Guidelines for the use of platelet transfusions. B J Haematol 2017. 176:365-394.
- 4. The Lancet Oncology. Dose recommendations for anticancer drugs in patients with renal or hepatic impairment. Lancet Oncol 2019; 20:e201-08.

Review

Name	Revision	Date	Version	Review date
Sara Castro	Annual Protocol review	May 2021	3.7	May 2023
(Advanced Haematology		-		-
Pharmacist)				

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2 of 2

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