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## APPHON/ROHPPA NEWSLETTER

Atlantic Provinces Pediatric Hematology/Oncology Network  
Réseau d'Oncologie et Hématologie Pédiatrique des Provinces Atlantiques

Winter 2014

### 2013 Conference

The 2013 **APPHON/ROHPPA Conference and AGM** held in November was by all accounts a roaring success. For the first time the APPHON/ROHPPA conference was preceded (and overlapped) by a day and a half with a **Hemophilia Workshop**. Both the workshop and the conference were well attended with about half of the attendees taking part in both.

Speakers for the *Hemophilia Workshop* included physiotherapists Carolyn Jarock from the IWK and Kathy Mulder and Greig Blamey both from Winnipeg. These 3 knowledgeable professionals gave excellent presentations and provided lots of opportunity for hands-on practical learning. Dr. Bowes presented, *Managing Hemophilia From a Distance* - focusing on rural Newfoundland, Dr. Chorney gave a presentation on *Managing Anxiety*, and Dr. Isler, an orthopedic surgeon from Montreal presented *Orthopedic Management of Joint Arthropathy*. All presentations were very well received. One of the highlights of the workshop was a presentation by a 13 year old boy with hemophilia (along with his hemophilia nurse) who spoke about his experiences and gave a demonstration of a self infusion. Everyone appreciated hearing the "patient perspective" from such an articulate young man.

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The theme of the *APPHON/ROHPPA Annual Conference* was **Back to Basics**. With this in mind, many of our own professionals presented on such topics as: dental/mouth care; palliative care; family resources; updates to guidelines, ALL, and hypersensitivity reactions; the need for psychological intervention and brain tumour late effects. There is certainly lots of talent amongst the APPHON/ROHPPA professionals. A family member gave a presentation which was very moving and truly appreciated. Key note speakers were Dr. Theresa Pinto on *Growth on Childhood Cancer*, Dr. Stephen Robbins on *Moving Discoveries from Bench to Bedside* and Dr. Devanand Pinto (no relation to Theresa) on *New Diagnostics and Personalized Health Care*.

If you have any suggestions for future themes, topics or speakers, please let us know.

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### APPHON Guidelines Update

The updated APPHON febrile neutropenia guidelines will soon be approved for use in the Maritimes. A couple of points have come up in this guideline that we feel require a little more clarification.

1. A blood culture refers to a bacterial culture. Aerobic bacterial blood cultures on automated systems detect yeast such as *Candida* and *Cryptococcus* species. However, if a fungal infection is suspected, the clinician should contact the hospital microbiology laboratory to determine if further fungal testing can be performed.
2. In an effort to facilitate timely antibiotic administration to children with cancer who have a fever and who may be neutropenic, the recommendation is to access the central venous catheter as soon as the child arrives at the hospital.
3. For children who are in diapers and in whom a urine culture is indicated, the culture should be obtained via a catheter. The reason being that a positive urine culture performed on a child who is in diapers and obtained using a sterile PUC will always require a catheter sample to confirm a diagnosis. This will not be possible if antibiotics have started.

*Tamara MacDonald, APPHON/ROHPPA Guidelines Coordinator*

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## Checking Counts for Chemotherapy Readiness

COG protocols clearly define parameters for starting every cycle of chemotherapy. An example of this direction follows:

Begin Maintenance on Day 57 of IM II or when peripheral counts recover to ANC  $\geq 750/\mu\text{L}$  and platelets  $\geq 75\,000/\mu\text{L}$ , whichever occurs later.

Per COG, once readiness is established, the cycle must begin within 72 hours. This has great implications particularly if the patient has been delayed due to low counts. For the patient delayed past Day (specified) of (current cycle) due to low counts, chemotherapy must begin within 72 hours of a CBC indicating readiness. In the situation of a patient for whom chemotherapy is

planned on a Tuesday pending counts to be performed Monday, if a CBC is done on the Friday and establishes that counts are ready, the chemotherapy must now begin on the Monday, NOT the Tuesday. This clearly has implications for the family, the treating centre, and the IWK oncology service. For this reason, if the patient is well, please do not check the CBC if not indicated by the oncology family care coordinator.

*Gloria Gallant, Clinical Leader, IWK Health Centre*

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## Dr. Ketan Kulkarni, Pediatric Hematologist/Oncologist, IWK Health Centre

Dr. Ketan Kulkarni recently completed his Fellowship in Pediatric Hematology/Oncology



and Thrombosis at Stollery Children's Hospital in Edmonton, Alberta followed by a clinical research fellowship with focus on thrombosis in pediatric oncology patients.

Ketan has recently joined the division of pediatric hematology oncology as a clinician-researcher with a special emphasis and expertise in benign hematology. His primary areas of interest include pediatric thrombosis, clinical and epidemiological research in pediatric hematology/oncology and global pediatric oncology. Please join us in welcoming him.

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## Proposed Telehealth Sessions

Attention RNs involved in Pediatric Hematology Oncology throughout the 3 Maritime Provinces:

At the APPHON/ROHPPA Conference, instead of having an issues related discussion at the discipline specific meeting, the nurses group had a presentation on Hemophilia Care (as there were many nurses involved with hemophilia care already at the conference). It was announced at the meeting, that to meet the needs of the Oncology nurses throughout the Maritimes we could organize 4 separate Telehealth discussion/issues meetings between the IWK Family Care Coordinators (FCCs) and the nurses involved with pediatric oncology from the following areas:

- 1) New Brunswick - Horizon Health Network (4 facilities)
- 2) New Brunswick - Vitalite Health Network (4 facilities)
- 3) Nova Scotia - Regional Hospitals (9 facilities)
- 4) PEI - Summerside and Charlottetown (2 facilities).

To Indicate your interest in being involved in this and also suggest any specific topics that you would like covered let Carol Digout or Cathie Watson know as soon as possible, it may take a couple of months to organize all four sessions and we are waiting to hear from you if this is something you want.

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## Dr. Jack Hand Educational Fund

Applications for educational funding through APPHON/ROHPPA's Dr. Jack Hand Educational Fund are now being accepted. The application can be found on our website ([www.apphon-rohppa.com](http://www.apphon-rohppa.com)) and the deadline is June 30, 2014.

Thanks to the Jack Hand educational fund; in November/13 I was able to attend the POGO conference in Toronto, for the first time. The conference, *Innovation in Childhood Cancer*, included a full day of nurse specific education followed by a 2 day Multi-disciplinary symposium. Pediatric cancer care has come a long way in the last thirty years and there are many exciting discoveries to come. Here is a small sample of the valuable information presented:

- 1.) Denise Mills (Sick Kids) gave a virtual tour of their new 131 I-MIBG (Metaiodobenzylguanidine) treatment suite, from conceptualization to completion. This area will offer hope and cutting edge treatment to children with refractory or relapsed neuroblastoma. The totally lead-lined suite is large enough to have an area for the parent that is close but removed enough from the treated child to offer protection. The treatment (radioactive iodine) will be prepared in a room attached to the suite and an antechamber allows the nurse to observe the child. The goal is to treat a new patient every 2 weeks. Each treatment takes approximately one week followed by a week to completely clean and prep the room. Previously, Canada had only one such room, in Montreal. Families were required to travel there or the USA for this treatment.
- 2.) Two studies that may change the way hydration is provided were of interest to me:
  - One study of 31 patients conducted at Sick Kids involved giving the hydration over 1 hour prior to protocols including Ifosphamide, Cyclophosphamide and high dose Methotrexate. Patients benefited from decreased wait times prior to chemotherapy, and faster discharge home. There was no increase in adverse events during the study.
  - A similar study at Sick Kids involved post hydration for osteosarcoma patients receiving high dose Methotrexate. Usually these patients spend a great deal of time in hospital following treatment to receive hydration and monitoring of renal function, isolating them from their normal activities. With much coordination the study group was able to send a small sample of patients home with their hydration. The hydration was contained in a backpack using bags with 3 Ls of solution. This is of benefit to those who are able to travel back to the hospital daily for evaluation. A YouTube video

was shown of one patient who benefited greatly from this approach. He was happy to be able to have meals with his family and snooze in his own bed with the family dog! I look forward to learning how this program progresses in the future.

- 3.) Surprisingly 25-50% of patients have largely under diagnosed and under treated neuropathic pain related to Vincristine. A study of 40 children with leukemia, receiving standard risk therapy at CHU in Quebec found that 90% had some type of symptom which could be related directly to their Vincristine treatment. The children described symptoms of tingling, numbness, weakness and/or cramps affecting the legs, feet, abdomen, back, jaw and hands. Some experienced these symptoms in more than one area. The number of doses before presentation of pain was 2 - 5. More study is needed, to understand the manifestation and description of these symptoms; to develop a tool for measuring, as well how to best treat and prevent neuropathic pain related to treatments.

Thank you again to the Jack Hand fund for helping me to attend this conference, not only an incredible educational experience but a great opportunity to network with people who share a passion for the care of children with cancer.

*Phyllis Branch, New Brunswick Patient Navigator  
-2013 Dr. Jack Hand Education Fund Recipient*

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## Levels of Care Documents

Please check out the [www.apphon-rohppa.com](http://www.apphon-rohppa.com) website, there is now a Levels of Care tab with the links to all of the Levels of Care documents. Also, the Education tab has the latest APHON updates so that nurses who are *grandfathered* have access to them to maintain their competency.

*Cathie Watson, Levels of Care Coordinator-  
Maritimes*

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## Pediatric Chemotherapy And Biotherapy Provider Course

**DATES:** June 7-8/2014

**TIME:** 08:00 - 16:00

**COURSE FEE:** \$275

**LOCATION:**

Parker Reception Room  
IWK Health Centre, Halifax, NS

**COURSE FACULTY:**

Mary Jean Howitt, CPON  
Amy Long, CPON  
Christa McGuirk, CPHON

**REGISTRATION INFORMATION:**

Forward application to:  
Mary Jean Howitt  
Clinical Leader of Development  
6 LINK IWK Health Centre  
5850/5980 University Avenue  
Halifax, NS, B3K 6R8

**REGISTRATION DEADLINE:** May 9<sup>th</sup>/14

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## Our Vision

*To facilitate access for Atlantic province children and youth to comprehensive, current, effective, evidence-based hematologic/oncologic treatment delivered as close to home as safely feasible.*

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