(To be printed on local headed paper)

GP LETTER

Dear Dr

Patient Name & DOB Patient Address

Study title: A Phase II Single Arm Study of the use of CODOX-M/IVAC with Rituximab (R-CODOX-M/IVAC) in the treatment of patients with Diffuse Large B-Cell Lymphoma (DLBCL) or Burkitt's Lymphoma (BL) of International Prognostic Index (IPI) or High Intermediate Risk

Version No: 5.0 Date: 13.05.2009

Your patient has newly diagnosed, poor prognosis diffuse large B cell lymphoma or Burkitts lymphoma. He/she has agreed to participate in a study evaluating combination chemotherapy with cyclophosphamide, doxorubicin, vincristine, methotrexate, etoposide and ifosfamide together with rituximab (an anti-CD20 monoclonal antibody) to see if this improves outcome for this disease.

The potential general side effects of chemotherapy are:

- 1. Bone marrow suppression (anaemia, neutropenia and thrombocytopenia)
- 2. Nausea and vomiting
- 3. Stomatitis
- 4. Alopecia
- 5. Diarrhoea
- 6. Numbness and parathesiae
- 7. Cardiac, pulmonary, hepatic or renal impairment
- 8. Blood clots

Specific possible side effects of CODOX-M/IVAC chemotherapy are:

Cyclophosphamide, Ifosfamide – bleeding from the bladder Doxorubicin - palpitations, weakening of the heart musculature Vincristine – nerve damage including tingling in hands and feet, constipation Etoposide – liver damage if impaired liver function

After rituximab:

Mild and temporary side effects occur during the first treatment. These include fever, chills, headache, tiredness, aching muscles and joints, itching redness of skin, nausea and mild drop in blood pressure. Most of these disappear upon temporary slowing or discontinuation of the treatment or after the administration of paracetamol and/or anti-allergic medication.

During treatment and for one year after chemotherapy, gametes may not be formed normally, if they are produced at all. The patient or their partner should use effective

contraception during this period. The patient is aware that it is necessary to share this information with their partner as birth defects can occur in any pregnancies during this period.

The treatment will make most patients infertile. All males and females over 30 years are likely to become infertile. Prior to commencing chemotherapy arrangements can be made for sperm storage. Women younger than 30 years may retain their fertility. It is though likely they will experience an earlier menopause by 5-10 years.

Your patient will be monitored closely for all side effects and dose adjustments and additional medications given as appropriate. The treatment is given with curative intent for up to 6 months.

Should your patient run into any problems	with this treatment, I would be grateful if
you could communicate these to (designa	ted person) or the out of
hours equivalent at the (hospital	name) on (phone
no). We will keep you closely	y informed of the patient's progress, and if
you should require any further information	, please do not hesitate to enquire.
Yours sincerely	.0