

Chemotherapy Patient Information

Breast Cancer

Drugs: Capecitabine (Xeloda®)

The aim of this leaflet is to help to inform you, and those that are close to you, about the side effects that may occur with this treatment.

Your treatment		
Days	Drugs	How is it taken?
1 to 14	Capecitabine (<i>cape-site-a-been</i>)	The tablets are taken TWICE a day with a glass of water within 30 minutes after the end of a meal. Do not break or crush tablets. If you forget to take a tablet, take your normal dose next time it is due. Do not take an extra dose.
15 to 21	Do not take capecitabine tablets from day 15 to day 21	

- this treatment cycle is repeated every 21 days. Your doctor will advise you of the number of treatments you will have
- you will need to have a blood test before you start each treatment cycle to check that your blood count has returned to normal. If your count is still low it may be necessary to delay your next treatment until your blood count has returned to normal. You will be told when to have these blood tests
- before restarting the each treatment cycle, you will need to get approval from your doctor
- tell your doctor if you are taking warfarin
- capecitabine tablets are available in two tablet strengths, 150 mg and 500 mg. The correct number of tablets for you is listed below

	Morning	Evening
Number of 500 mg tablets		
Number of 150 mg tablets		

Important Information

Do **not** stop taking any prescribed medicines (including low dose aspirin) without first speaking to your doctor.

- take your anti-sickness medications if prescribed by your doctor
- attend to your mouth care after each meal and before you go to bed

Stop taking Capecitabine and contact your doctor if you have any of the following side effects:

- uncontrolled diarrhoea - passing bowel motions through the night or passing an extra 4 to 6 bowel motions per day
- uncontrolled vomiting - 2 to 5 episodes in a 24 hour period
- a sore mouth which is interfering with your ability to eat
- pain and redness of the palms of your hands and the soles of your feet

If you:

- become unwell
- develop chills, shivers or shakes
- develop a temperature of 38°C or above
- feel short of breath
- have uncontrolled diarrhoea
- have uncontrolled vomiting
- develop chest pain

Go to your nearest hospital emergency department immediately

If you have any questions or concerns about your treatment and the side effects, please contact your treating team

Daytime contact.....

After hours contact.....

Side Effects

Below is a list of some of the possible side effects of this treatment and when they are likely to occur. This is a guide only. Remember most of these side effects are temporary and can be managed. Some people have few side effects while others might have many, everyone is different. If you are unsure about any of your symptoms, contact your doctor or nurse.

Immediate (onset hours to days)

Nausea and Vomiting

Feeling sick and vomiting can occur. Take your medicine as told to you by your doctor even if you do not feel sick. If you feel sick and vomit tell your doctor or nurse. If you continue to vomit or feel light-headed go to your nearest hospital emergency department without delay. For more information ask for the **Managing Nausea and Vomiting fact sheet**.

Chest Pain

Chest pain is uncommon, but may occur at any time during treatment. If you feel short of breath or develop chest pain call an ambulance, do not delay.

Changes in Sense of Smell and Taste

Changes to taste and smell are common. Food may become bland or taste metallic. To mask the taste changes eat sugar free mints or chew sugar free gum, marinate meats in fruit juices or wine, flavour food with sauces and herbs. Using plastic forks and knives help reduce the metallic taste.

Early (onset days to weeks)

Increased Risk of Infection

A side effect of this treatment is a low white blood cell count, particularly affecting the type of white blood cell called neutrophils. A low neutrophil count is called neutropenia. Neutrophils are the type of white blood cell that fights infection. The lower your neutrophil count drops, the greater the risk of you developing an infection.

While your neutrophil count is low, you are at increased risk of infection. Such infections can come from bacteria (germs) that we normally carry on our skin or in our bowel. As this treatment can cause neutropenia, it is important that you monitor yourself for signs of infection and check your temperature if you are unwell.

Your blood count will be checked by your doctor at different times before and during your treatments. If your neutrophil count has not returned to normal, your doctor may delay your next treatment and/or reduce the doses of the drugs.

If you develop a fever of 38°C or higher, have shivers, shakes or feel unwell, go to your nearest hospital emergency department or call an ambulance. Do not delay as this is life-threatening.

For more information ask for the **Patient Information Sheet - Neutropenia and Infection**

Low platelets and Increased Risk of Bleeding

This treatment may lower the platelet count in your blood. Platelets help your blood to clot, and when low, increase the risk of bleeding and bruising. So, if you have bleeding or bruising, tell your doctor or nurse at your next appointment; however, if you have uncontrolled bleeding, go to your nearest emergency department. If your platelet count is low, you may require a platelet transfusion.

Diarrhoea

Diarrhoea can occur with this treatment and may happen at any time. This can usually be managed by ensuring you have adequate fluid intake and taking loperamide (Gastrostop®) or other anti-diarrhoeal medication as required. You should, however, report what happened to your doctor or nurse at the next appointment. If your diarrhoea is not controlled and you have more than 5 loose bowel motions per day, and especially if you feel light-headed or dizzy, you should go to your nearest hospital emergency department.

Sore Mouth

Soreness of the mouth and sometimes mouth ulcers are possible side effects of this treatment, so it is important that you care for your mouth. Rinse your mouth after each meal and before going to bed with salty water or sodium bicarbonate mouthwash. To make the mouthwash, dissolve 1/2 teaspoon of salt OR 1 teaspoon of sodium bicarbonate (baking soda) in a glass of warm water (approximately 200 mL). Clean your teeth gently with a soft toothbrush. If you normally floss continue to do so. Tell your doctor or nurse if you develop a sore mouth, pain on swallowing or a white coating on your tongue.

Skin Changes

Your skin may become dry, and you may notice changes to your skin in areas that have been exposed to the sun. Keep your skin moisturised with a cream such as sorbolene or aqueous cream. When outside always protect yourself from the sun, wear a hat, sunglasses and use a broad spectrum SPF30+ sunscreen. Tell your doctor or nurse of any skin changes.

Loss of Appetite

You may not feel like eating. Try to eat small meals or snacks throughout the day instead of three large meals. If you are concerned about your food intake or are losing weight ask to speak to a dietitian.

Feeling Tired

Fatigue is common. If you do feel tired, you may need to limit your activities and concentrate on what is most important to you. However, regular exercise each day, along with plenty of rest, has been shown to help improve fatigue.

Watery Eyes

Your eyes may become sore, feel gritty, dry or watery and may be sensitive to sunlight, and sometimes this affects your vision. Tell your doctor about these symptoms at your next appointment. Eye drops may help soothe the symptoms. Occasionally, you may need to be referred to an eye specialist. It is suggested that when you are outside, you wear sunglasses to minimise eye irritation.

Dry Itchy Skin

Dry and itchy skin rash is common. Keep your skin moisturised with a gentle non perfumed moisturising cream e.g. sorbolene or aqueous cream. Do not scratch your skin. Always protect yourself from the sun, wear a hat, sunglasses, and use a broad spectrum SPF30+ suncream. Talk to your doctor about treatment options.

Sun Sensitive Skin

Your skin will be more sensitive to the sun. Always protect your self from the sun, wear a hat and sunglasses, and use SPF30+ sun cream.

Hand Foot Syndrome

Hand foot syndrome can occur. Your skin may become red, hot and tender. Small blisters can form and your skin may peel. Moisturise your skin with sorbolene or aqueous cream. Avoid hot water. Tell your doctor without delay, if you develop any skin changes.

Stomach Pain

Stomach pain may be a dull ache, cramping, or sharp pain. Tell your doctor or nurse if you develop stomach pain or cramps. If you are unable to control the stomach pain go to the nearest hospital emergency department.

Late (onset weeks to months)

Low Red Blood Cell Count

This treatment can cause a low red blood cell count which may cause you to feel more tired than usual. You may feel light-headed, dizzy and appear pale. Tell your doctor or nurse if you have these symptoms as you may require a blood transfusion.

Yellowing of the skin and eyes

Yellowing of your skin and eyes are uncommon. It is caused by the drugs affecting your liver. You will have regular blood tests to check your liver function. If you notice your urine is a dark colour or the whites of your eyes look yellow tell your doctor or nurse.

Delayed (onset months to years)

Menopausal Symptoms

Chemotherapy can cause you to enter menopause. This may mean that you have irregular or no menstrual periods, vaginal dryness, hot flushes, sweating, mood changes or problems sleeping. There is still a risk of pregnancy even if your periods have stopped. You should still use birth control, until permanent menopause is confirmed. Talk to your doctor or nurse for more information.

Frequently Asked Questions

Do I need to take any special precautions at home while on chemotherapy?

Chemotherapy drugs are transported via your blood stream to all parts of your body. The majority of chemotherapy drugs are excreted in your bodily fluids. It is important that you take the following precautions at home for seven days after your last chemotherapy treatment.

- flush the toilet on full flush, with the lid down, after you have used it
- keep a bowl or plastic bag handy in case you feel sick. If you use a bowl for vomiting, this must not be used for anything else, and needs to be disposed of when you finish your chemotherapy treatment
- clothing or bed linen that is soiled with urine, bowel motions and/or vomit should be handled with disposable gloves and washed separately from other items
- if you are sexually active, you or your partner will need to use a barrier method (i.e. condoms) during sex to protect your partner from being exposed to chemotherapy drugs

If you have somebody at home helping you with your chemotherapy medications they must wear disposable gloves when handling the medication. It is also important these medications:

- are not crushed, cut or chewed (if you are unable to swallow the medication whole, tell your doctor)
- are stored as directed by your pharmacist
- kept out of the reach of children

Will treatment affect my sex life?

The desire to have sex may decrease because you may become tired, anxious or unwell during treatment. It may help to discuss your worries with your partner and/or doctor or nurse.

Do I still need to use contraception?

Yes. It is still possible to fall pregnant. Pregnancy should be avoided as chemotherapy drugs can have a harmful effect on an unborn baby. Talk to your doctor about suitable contraception methods.

Can I still breast feed?

It is recommend that you do not breast feed during the entire course of your treatment, as these drugs can pass into breast milk.

Is it safe to take medicines, vitamins and/or herbal preparations during my treatment?

Before starting any medicines, including prescription and over-the-counter medicines, vitamins, natural or herbal therapies, tell your doctor, pharmacist or nurse. Some of these medicines may interact with your treatment.

What can I take for a headache or mild pain?

Paracetamol is safe to take if you have a headache or other mild aches and pains. It is recommended that you avoid taking aspirin, ibuprofen and other anti-inflammatory type medications for pain while you are having chemotherapy. If these medications have been prescribed by your doctor, do not stop taking them without first speaking with your doctor.

Should I be on a special diet while having treatment?

While you are receiving this treatment it is important that you try and maintain a healthy diet. There are some foods that have

may cause food-borne illnesses in high risk individuals and should be avoided. For further information on foods to avoid and food hygiene please ask for a copy of the Listeria and Food brochure. If you have any concerns about recent weight loss or weight gain or questions about your diet, please ask to speak to a dietitian.

Can I still drink alcohol?

It is fine to drink 1-2 standard drinks a day with most chemotherapy drugs. In some cases alcohol can interfere with the way some chemotherapy drugs work. Your doctors and nurses giving the treatment will be able to give you specific advice about whether drinking alcohol is safe with your chemotherapy drugs.

Can I have a vaccination?

Vaccination such as flu and tetanus are safe to receive while you are having treatment. Live vaccines (for you and your children) should be postponed until at least 6 months after treatment. If in doubt, check with your doctor before having any vaccinations.

How do I reduce my risk of getting an infection?

You will be most at risk of getting an infection 10 to 14 days after you have your chemotherapy. During this time you should try to avoid contact with people who are sick (i.e. chicken pox, flu), and minimise time spent in crowded places. This will help reduce the risk of you getting an infection.

Support & Information Services

For telephone support

- Cancer Council Helpline Phone 13 11 20

For online support

- Cancer Connections www.cancerconnections.com.au

For further information

- eviQ Cancer Treatments online www.eviQ.org.au
- Cancer Council Australia www.cancer.org.au
- Cancer Council NSW www.cancercouncil.com.au
- Food Standards Australia New Zealand - **Listeria & Food Safety**
(at www.foodstandards.gov.au/consumer/safety/listeria/pages/listeriabrochuretext.aspx)
- Cancer Australia www.canceraustralia.gov.au/affected-cancer/cancer-types/breast-cancer
- Breast Cancer Network Australia www.bcna.org.au
- Westmead Breast Cancer Institute www.bci.org.au
- Australasian Menopause Society www.menopause.org.au

For patient advocacy

- Cancer Voices NSW www.cancervoices.org.au

For support for young people living with cancer (12-24 years):

- Canteen www.canteen.org.au
- NOWWHAT www.nowwhat.org.au

For free workshops on caring for your hair and skin while on treatment

- Look Good Feel Better www.lgfb.org.au

Disclaimer: This document reflects what is currently regarded as safe practice. However, as in any patient's situation there may be factors which cannot be covered by a single set of guidelines. This document does not replace the need for the application of medical judgment to each individual case. Some of the side effects from cancer chemotherapy may only become evident after a long period of time, but many of these can be avoided with careful monitoring. Rarely, some chemotherapy drugs can increase your chance of developing a second cancer. Generally, the benefits of your treatment should outweigh the risks. Your doctor will discuss the specific risks of your treatment with you. Contact your cancer clinic staff or doctor if you feel your symptoms are getting worse or you are not able to manage them.

The currency of this information is guaranteed only up until the date of printing, for any updates please check www.eviq.org.au

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