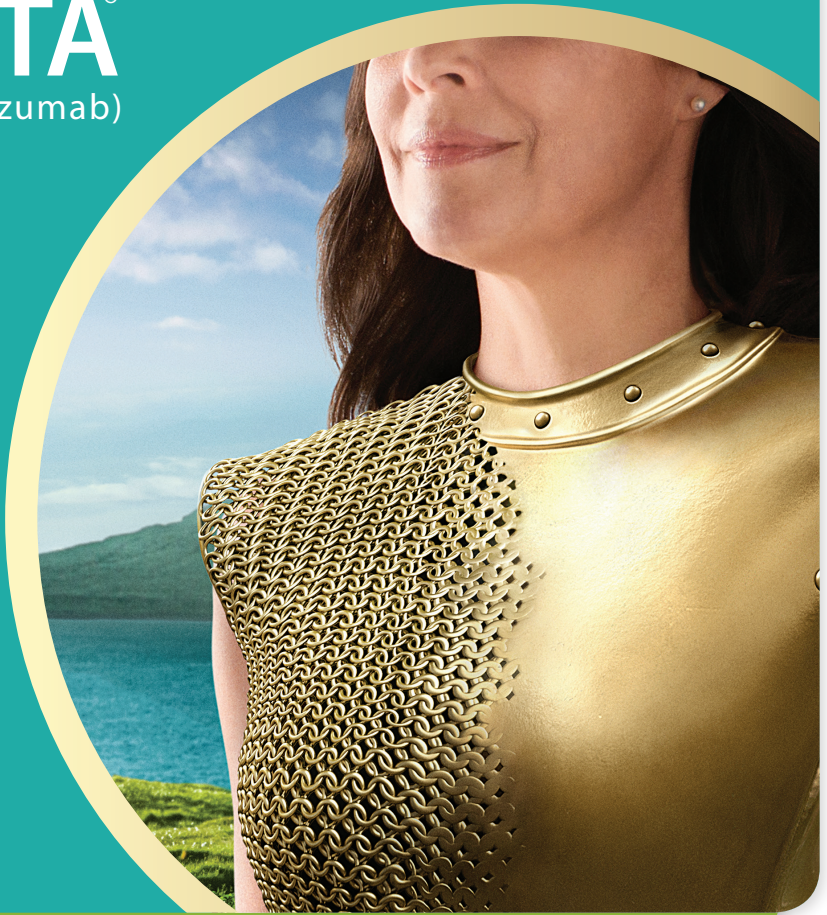


Your guide to

# PERJETA<sup>®</sup>

(pertuzumab)



# ABOUT THIS BOOKLET



Being diagnosed with breast cancer can be a particularly stressful time in your life, and it can sometimes be hard to find answers to help you understand and cope with your condition and treatment. Your doctor has prescribed PERJETA® (pertuzumab) for the treatment of your HER2-positive advanced breast cancer. This booklet has been developed to help you understand more about HER2-positive breast cancer, what to expect from your treatment, and options for where to go to learn more.

The information provided should not replace the advice of your doctor or other healthcare professionals. As everybody's experience of breast cancer is different, your doctor is best able to advise on why you have been prescribed PERJETA and answer any questions that relate to your specific treatment plan.

**THIS GUIDE IS VERY IMPORTANT TO ME. IF FOUND, PLEASE RETURN TO:**

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Address: \_\_\_\_\_

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# IMPORTANT CONTACTS

## NURSES

Name: _____	Alternative contact if nurse is unavailable: _____
Phone: _____	_____
Name: _____	_____
Phone: _____	_____
Best times to contact: _____	_____
<input type="checkbox"/> am / <input type="checkbox"/> pm	

## DOCTORS

## AFTER HOURS CONTACT

Medical Oncologist: _____	_____
Phone: _____	_____
GP: _____	_____
Phone: _____	_____
Other Doctor: _____	_____
Phone: _____	_____

## HOSPITAL

Hospital Name: \_\_\_\_\_

Main Switchboard: \_\_\_\_\_

Address: \_\_\_\_\_

Pharmacist: \_\_\_\_\_

Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Social Worker: \_\_\_\_\_

Phone: \_\_\_\_\_

Other: \_\_\_\_\_ Other: \_\_\_\_\_

Phone: \_\_\_\_\_ Phone: \_\_\_\_\_

# UNDERSTANDING YOUR CONDITION

## What is meant by advanced breast cancer?<sup>1</sup>

Breast cancer occurs when cells in the breast tissue multiply and grow in an uncontrolled way. This uncontrolled growth may develop into a lump called a tumour.

You have been diagnosed with advanced breast cancer, which means that the cancer cells have travelled in the bloodstream or lymphatic system to other parts of the body such as the bones or liver.

The lymphatic system is a network of tiny vessels that plays an important role in collecting fluid and waste products from the body's tissues, but they can also help move cancer cells from their original location to other parts of the body.

Advanced breast cancer is sometimes also called metastatic cancer.

## What is meant by HER2-positive breast cancer?<sup>1,2</sup>

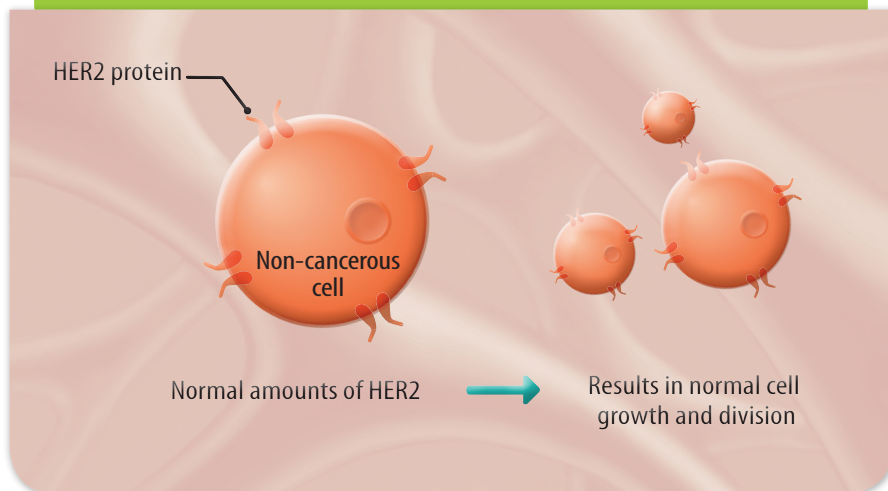
HER2 (or human epidermal growth factor receptor 2) is a protein that is found on the surface of all cells, including healthy cells and cancer cells. HER2 causes cells to grow and divide.

Some people with breast cancer have higher than normal levels of this HER2 protein on the breast cancer cells. This is sometimes described as 'overexpression' of HER2. People with these high levels of HER2 protein are referred to as having 'HER2-positive breast cancer'.

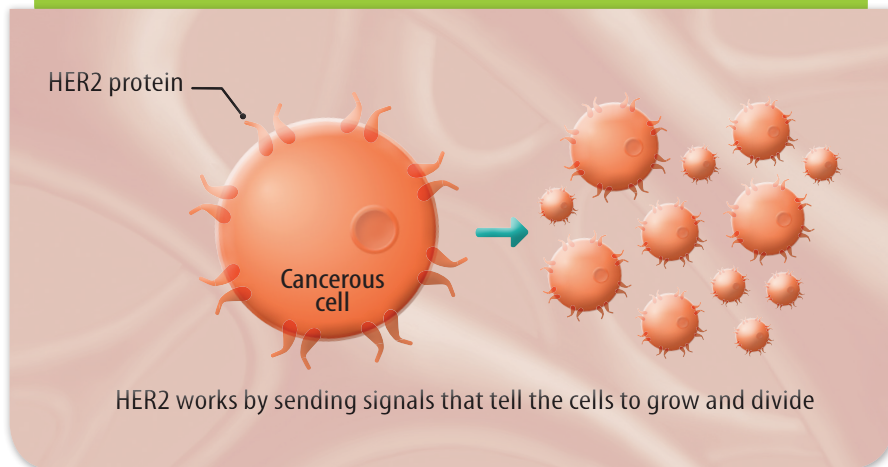
Samples of your tumour have been tested in a laboratory and this diagnosis has been confirmed in the pathology report sent to your doctor. HER2-positive breast cancer cells tend to divide and grow more rapidly than other types of breast cancer cells.

## The role of HER2 in the growth of breast cancer cells<sup>1,2</sup>

### NORMAL BREAST CELL<sup>2,3</sup>



### HER2-POSITIVE BREAST CANCER CELL<sup>2,3</sup>



# TREATING HER2-POSITIVE ADVANCED BREAST CANCER WITH TARGETED THERAPIES<sup>2,4</sup>

The key aims of your treatment are to:

- control the growth and spread of the cancer
- help you live as long as possible
- help relieve any cancer-related symptoms you may be experiencing
- improve or maintain your quality of life.

Your doctor has chosen your treatment based on what is most likely to control your cancer, and what side effects your doctor feels you can cope with. Because your breast cancer is HER2-positive, in addition to chemotherapy, you are eligible to receive what is called a *HER2-targeted therapy*.

## Targeted therapies<sup>2,5,6</sup>

Targeted therapies work by recognising and attaching to specific molecules (such as HER2) in the body that play a role in the development of cancer. These targeted therapies block the action of the molecule they attach to, helping to reduce the growth and spread of the tumour.

A number of therapies have been developed that target the HER2 protein. These targeted therapies, such as PERJETA, aim to fight cancer cells that have too much HER2. PERJETA is always prescribed with another targeted therapy, HERCEPTIN® (trastuzumab).

Since healthy cells also have HER2 (but not as much as HER2-positive cancer cells), HER2-targeted therapies can also affect healthy cells, which may cause side effects.



# HOW PERJETA IS DESIGNED TO WORK<sup>2</sup>

## PERJETA works with HERCEPTIN to stop the growth and spread of cancer cells<sup>2,5</sup>

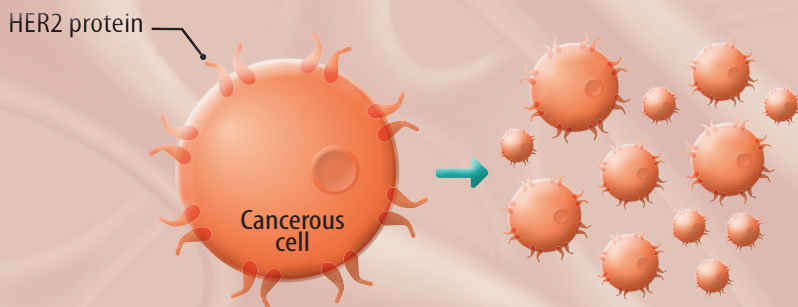
PERJETA and HERCEPTIN both target the HER2 protein but work in different ways to block the growth and spread of cancer cells. They may also encourage the body's own immune cells to help destroy the cancer cells.<sup>3,7</sup>

PERJETA is a monoclonal antibody. This means that it recognises and targets ONE protein in the body – the HER2 protein. When PERJETA attaches to HER2 on breast cancer cells, it may kill them, or it may slow or stop their growth. You can read more about how PERJETA works in the Consumer Medicine Information (CMI) leaflet included in the pocket.

HERCEPTIN also attaches to the HER2 protein to stop the growth and spread of cancer cells, but it attaches to HER2 in a different place to PERJETA. For more information about HERCEPTIN and how it works, you can refer to the HERCEPTIN Patient Booklet and the HERCEPTIN Consumer Medicine Information (CMI) leaflet.

**PERJETA and HERCEPTIN are targeted therapies that work in different ways to fight breast cancer cells that have too much HER2<sup>2,5</sup>**

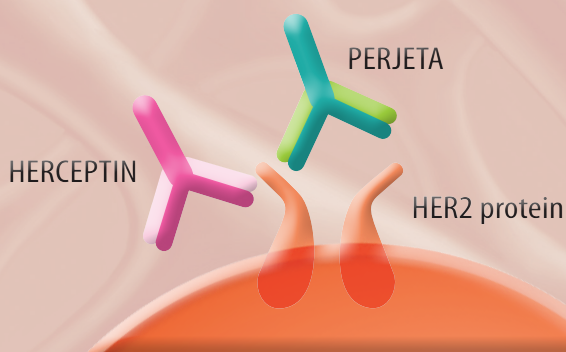
## HER2 SENDS SIGNALS TO THE CANCER CELL THAT MAKES THE TUMOUR GROW<sup>2,3</sup>



HER2 works by sending signals that tell the cells to grow and divide

## PERJETA AND HERCEPTIN TARGET HER2<sup>2,3,7</sup>

**PERJETA and HERCEPTIN target HER2 in different ways, helping to slow down cancerous cell growth**



# YOUR TREATMENT WITH PERJETA

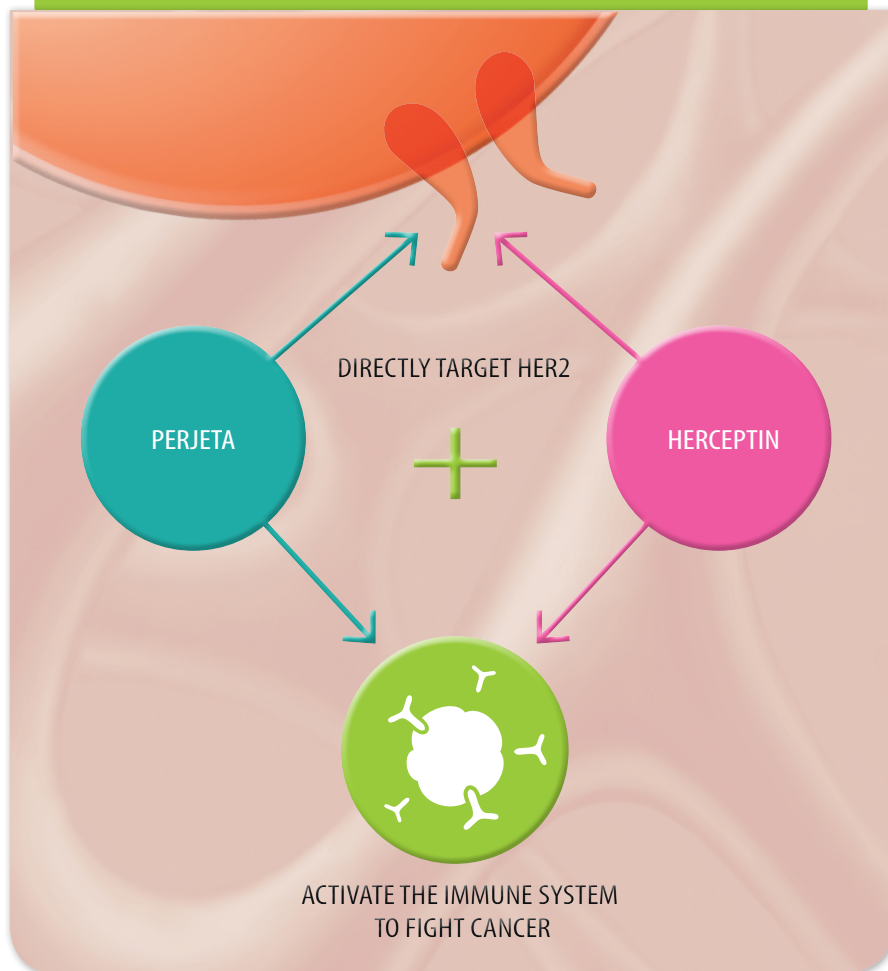
## Your treatment plan

### BEFORE YOU ARE GIVEN PERJETA, TELL YOUR DOCTOR IF:<sup>2</sup>

- you have a history of heart problems such as;
  - heart failure (where the heart muscle cannot pump blood strongly enough)
  - cardiac arrhythmias (abnormal beating of the heart)
  - poorly controlled high blood pressure or
  - recent heart attack
- you have previously been treated with chemotherapy medicines known as anthracyclines (e.g. doxorubicin)
- you have ever had heart problems during previous treatment with HERCEPTIN
- you have inflammation of the digestive tract (e.g. sore mouth or diarrhoea)
- you are allergic to any other medicines or any other substances such as foods, preservatives or dyes
- you are pregnant or intend to become pregnant
- you are breast-feeding or plan to breast-feed.

**You have been prescribed PERJETA and HERCEPTIN as treatments for your HER2-positive advanced breast cancer.**

PERJETA IS DESIGNED TO WORK TOGETHER WITH HERCEPTIN<sup>2,3,5</sup>



Your doctor will discuss your individual treatment plan with you before you start, and regularly update you as time goes on.

## Other treatments you receive with PERJETA<sup>2</sup>

In addition to PERJETA and HERCEPTIN, your doctor will prescribe other treatments. When you first start PERJETA and HERCEPTIN, you will also receive treatments that may be given in the same way on the same day.

One of those treatments will be a chemotherapy drug. Talk to your doctor to find out more about this chemotherapy.

Everyone experiences treatment differently. As you progress through treatment, your doctor may make changes to the medications you receive according to how you respond to treatment, any side effects you may experience or other considerations.

**Your healthcare team can give you more information about your individual treatment schedule.**

**For further information about how HERCEPTIN and any other treatments are given, please ask your doctor, nurse or pharmacist for the Consumer Medicine Information (CMI) leaflets for these medicines.**

**It is important not to miss a treatment unless directed by your doctor.**

# HOW PERJETA IS GIVEN

## **PERJETA is given as an intravenous (IV) infusion<sup>2</sup>**

PERJETA is given as an IV infusion, which means that the drug is delivered through a needle that your nurse inserts into a vein. If you have been treated for breast cancer before, you will already be familiar with this. If you have not been treated for breast cancer before, you can ask your doctor or nurse to explain this to you in more detail.

## **PERJETA is given once every 3 weeks<sup>2</sup>**

PERJETA is typically given every 3 weeks on the same day as HERCEPTIN and other IV treatments you are receiving. Your doctor will let you know how these other treatments will be given. The number of infusions you will have depends on how you respond to treatment.

## **Your first infusion<sup>2</sup>**

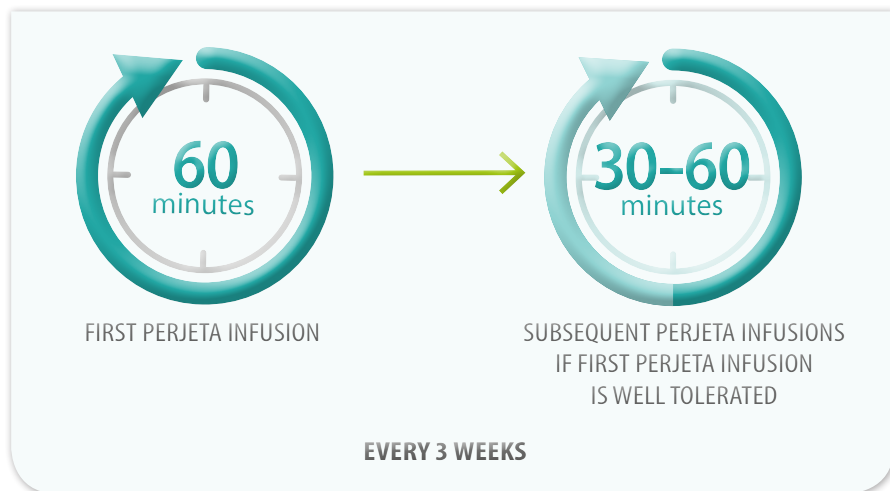
The amount of medicine you are given, and how long each infusion will last, are different for the first and following doses of PERJETA.

Your first dose of PERJETA will be given as an IV infusion over 60 minutes.

Your doctor or nurse may monitor you for 30–60 minutes after your PERJETA infusion to check for any infusion or allergic reactions. They may adjust, delay or stop your PERJETA treatment if a reaction occurs.

## Following infusions<sup>2</sup>

If your first PERJETA infusion was well tolerated, your next treatment may take less time.



Infusion time may vary from person to person depending on how well the treatment is tolerated.

# PREPARING FOR AN INFUSION

Being prepared for your infusion should help the day run more smoothly for you.

You will usually have your infusion in the chemotherapy outpatients department. You will need to sit while the infusion is in progress so bring something to help pass the time, like a magazine or book, or some music to listen to.

Unless your doctor tells you otherwise, you should eat normally before and after your treatment.

You may like to bring a friend or partner with you to keep you company.

Check whether there is food available at the clinic and if not, take a nice lunch and something to drink with you.





# POSSIBLE SIDE EFFECTS WITH PERJETA<sup>2</sup>

All medicines can have side effects. Sometimes they are serious, most of the time they are not. You may need medical treatment if you experience some of the side effects, so it is important to know the symptoms you should watch out for.

Because PERJETA may be used with other medicines that treat breast cancer, it may be difficult for your doctor to tell whether the side effects are due to PERJETA or due to the other medicines.

**Some of the common side effects of PERJETA when used with other medicines to treat breast cancer are:<sup>2,3</sup>**

- diarrhoea
- hair loss (alopecia)
- low level of a particular type of white blood cells (neutropenia)
- feeling sick (nausea)
- fatigue
- rash.

This is not a complete list of all possible side effects. Others may occur, and there may be some side effects not yet known. For a list of known side effects, please review the PERJETA Consumer Medicine Information (CMI) leaflet at the back of this book and talk to your doctor.

## Managing rash<sup>8</sup>

There are some simple steps you can take to help prevent or manage any rash you experience while being treated with PERJETA.

### *Prevention and treatment*

- Moisturise your skin regularly
- Apply a high SPF sunscreen twice daily

**Speak to your doctor, nurse or pharmacist about other therapies that may help.**

## If you get a fever<sup>2</sup>

Call your healthcare team immediately if you get a fever, and notify them if you have inflammation of the digestive tract (e.g. sore mouth or diarrhoea).

When PERJETA is given with other cancer treatments (HERCEPTIN and docetaxel) the number of white blood cells may drop and fever may develop. If you have inflammation of the digestive tract (e.g. sore mouth or diarrhoea), you may be more likely to develop this side effect.

## Managing diarrhoea<sup>3</sup>

Diarrhoea has been more commonly reported with PERJETA-based treatments. Let your healthcare team know if you experience loose bowel motions.

## Infusion reactions<sup>2,3</sup>

Infusion reactions have been described by patients receiving PERJETA, indicating that some patients may be allergic to their treatment.

These are sometimes called 'hypersensitivity reactions' or 'anaphylaxis' (a more severe allergic reaction). Infusion reactions may occur during or on the same day as an infusion. Your doctor or nurse will monitor you during your infusion and for 30–60 minutes afterwards.

**Most infusion reactions are mild to moderate in severity, but some may require immediate medical treatment, so tell your doctor or nurse if you experience:**

- swelling of your face, lips, tongue or throat with difficulty breathing
- swelling of other parts of your body such as your hands or feet
- shortness of breath, wheezing or trouble breathing
- feeling sick (nausea)
- diarrhoea
- headache
- fatigue or tiredness
- abnormal or irregular heartbeat
- rash, itching or hives on the skin
- fever or chills
- cough.

For more information on side effects, including serious side effects that require immediate medical attention, read the Consumer Medicine Information (CMI) included in the back pocket of this guide.

If you experience any serious side effects, tell your doctor immediately or go to the Emergency Department of your nearest hospital. Tell your doctor if you notice anything that is making you feel unwell, even if it is not included in the Consumer Medicine Information (CMI).

Do not be alarmed by this list of possible side effects. You may not experience any of them.

## Monitoring your heart<sup>2</sup>

Changes in heart function have been reported with HER2-targeted therapies, including PERJETA. As a result, your doctor may monitor your heart function during your treatment. Some signs and symptoms of heart problems are:

- shortness of breath or getting tired easily after light physical activity (such as walking)
- shortness of breath at night, especially when lying flat
- swelling of the hands or feet due to fluid build up
- cough
- abnormal or irregular heartbeat.

**Tell your doctor or nurse immediately if you have any signs or symptoms of heart problems.**

### NURSE/PHARMACIST NOTES:

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# ADDITIONAL SUPPORT

## Where can I find more support?

Having treatment for breast cancer can be a particularly stressful time in your life and you might sometimes feel overwhelmed and alone. That's why it's important for you to rely on your family and friends for support, if and when you need it.

Your healthcare team is also a great source of support in helping you deal with your cancer diagnosis and treatment. They can answer your questions and provide information about looking after yourself properly, as well as helping you access more practical support.

## The importance of practical support

Support from your family and friends can be practical as well as emotional. Don't be afraid to ask your family or friends for practical support, such as:

- picking up your groceries
- dropping off your mail
- taking you to and from appointments.

Sometimes it's not easy to do but you should try to speak up if you need anything. You'll generally find that people want to help but may not be sure of the best way to do so. You may also like to contact one of the support organisations listed on the following pages.

## Support organisations

There are a variety of organisations that provide support and assistance to people who have breast cancer. Some of these are listed below.

### BREAST CANCER NETWORK AUSTRALIA (BCNA)

BCNA works to ensure that Australians affected by breast cancer receive the very best support, information, treatment and care appropriate to their needs. BCNA provides a range of free information, connects women through an online network and in person at information forums, and advocates on behalf of 100,000 members across Australia to improve outcomes for women affected by breast cancer.

**[www.bcna.org.au](http://www.bcna.org.au) • Phone: 1800 500 258**

### CANCER COUNCIL AUSTRALIA

Cancer Council Australia is the nation's peak non-government cancer control organisation. Cancer Council undertakes a broad range of activities to provide up-to-date information about all aspects of living with cancer, as well as cancer prevention. They offer free resources, including brochures and ebooks on cancer, and information and support for patients, their families and carers.

**[www.cancer.org.au](http://www.cancer.org.au) • Cancer Council: 13 11 20**  
**Cancer Connections: [www.cancerconnections.com.au](http://www.cancerconnections.com.au)**

# QUESTIONS YOU MAY WANT TO ASK YOUR HEALTHCARE TEAM

To better understand your treatment plan, it may help to have a discussion with someone on your healthcare team who you are comfortable with. Here are some common questions to get you started. You can use the following pages to take notes.

- What do I need to prepare for my infusion?
- How long do I need to be on PERJETA?
- Do I need to have regular blood tests?
- How often will I need to attend appointments during my treatment with PERJETA?
- What side effects should I expect, and how severe might they be?
- Are there methods to help manage certain side effects?
- How can I tell if the treatment is working?



## NOTES

[illegible]

## NOTES

[illegible]

## A PATIENT INITIATIVE PROUDLY SPONSORED BY ROCHE PRODUCTS PTY LIMITED.

We are grateful to Cancer Council NSW for permission to use content about breast cancer from their website. Visit [www.cancercouncil.com.au](http://www.cancercouncil.com.au) or call 13 11 20 to access Cancer Council's *Understanding Breast Cancer* booklet.

This guide is intended as a resource for patients receiving PERJETA for the treatment of HER2-positive advanced breast cancer. It is not intended as a substitute for advice from a qualified medical professional, nor is it considered a comprehensive and exhaustive source of information. For further information about PERJETA, refer to the PERJETA Consumer Medicine Information (CMI) included in the pocket. If you have any questions about your diagnosis or treatments, please speak to your doctor or oncology nurse.

**References:** 1. Cancer Council NSW. Understanding breast cancer: a guide for people with cancer, their families and friends. Revised August 2014. Available at: [http://www.cancercouncil.com.au/wp-content/uploads/2014/09/Breast-Booklet\\_-\\_NSW-lversion.pdf](http://www.cancercouncil.com.au/wp-content/uploads/2014/09/Breast-Booklet_-_NSW-lversion.pdf). Accessed January 2015. 2. PERJETA® (pertuzumab) Consumer Medicine Information leaflet. Available at <http://www.roche-australia.com/home/products/pharmaceuticals/perjeta.html>. 3. PERJETA® (pertuzumab) Approved Product Information. Available at <http://www.roche-australia.com/home/products/pharmaceuticals/perjeta.html>. 4. Cancer Australia. Treatment options for secondary (metastatic) breast cancer. Available at <http://canceraustralia.gov.au/affected-cancer/cancer-types/breast-cancer/treatment/treatment-options-breast-cancer-type/treatment-options-secondary-metastatic-breast-cancer>. Accessed January 2015. 5. HERCEPTIN® (trastuzumab) Consumer Medicine Information leaflet. Available at <http://www.roche-australia.com/home/products/pharmaceuticals/herceptin.html>. 6. National Cancer Institute. Targeted cancer therapies. Reviewed April 2014. Available at: <http://www.cancer.gov/cancertopics/factsheet/Therapy/targeted>. Accessed January 2015. 7. HERCEPTIN® (trastuzumab) Approved Product Information. Available at <http://www.roche-australia.com/home/products/pharmaceuticals/herceptin.html>. 8. Drucker A *et al*. *Breast Cancer Res Treat* 2012;135:347–354.



