

Idarubicin and ATRA (tretinoin)

The possible benefits of this treatment vary; for some people this chemotherapy may reduce the risk of the cancer coming back, for others it may control the cancer and its symptoms. Your doctor will explain to you whether you will receive chemotherapy or another type of treatment, or a combination of both. Your doctor or nurse will be happy to answer any questions. You will find it useful to refer to the booklet 'Chemotherapy, a guide' which gives general information on chemotherapy and side effects.

Your treatment

Your doctor or nurse clinician has prescribed for you a treatment with a chemotherapy called idarubicin and a tablet called tretinoin also known as ATRA. ATRA belongs to a group of medicines known as retinoids which are structurally related to vitamin A. ATRA decreases the growth of certain types of diseased blood cells.

We will give you a course of ATRA (tretinoin) tablets. Take these tablets daily (morning and evening) until the course has finished or your doctor or nurse tell you to stop taking them.

This treatment can have serious or possibly life-threatening side effects. It is very important that you report side effects straight away. Don't delay, if you feel unwell, please ring The Christie Hotline on **0161 446 3658**. The lines are open 24 hours a day.

Increased risk of serious infection

You are vulnerable to infection while you are having chemotherapy. Minor infections can become life-threatening in a matter of hours if left untreated. Symptoms of infection include fever, shivering, sweats, sore throat, diarrhoea, discomfort when you pass urine, cough or breathlessness. We recommend that you use a digital thermometer so you can check your temperature. You can buy one from your local chemist.

If you feel unwell, you have symptoms of an infection or your temperature is 37.5°C or above, or below 36°C contact The Christie Hotline straight away.

Possible side effects

Chemotherapy can cause many different side effects. Some are more likely to occur than others. Everyone is different and not everyone gets all the side effects. Most side effects are usually temporary, but in some rare cases they can be life-threatening. It is important to tell your hospital doctor or nurse about any side effects so they can be monitored and, where possible, treated.



Common side effects (more than 1 in 10)

• Idarubicin

Idarubicin because of its red colour, may discolour your urine red or pink for the first few times following your injections. This is perfectly normal and nothing to worry about.

ATRA (tretinoin) headaches and bone pain

ATRA (tretinoin) can cause headaches and bone pain. If you experience this, please tell your doctor or nurse who can give you a painkiller.

ATRA (tretinoin) changes in mood or behaviour

Another ATRA potential side effect is psychiatric reactions including depression and suicidal thoughts. You should speak to your doctor if you experience any changes in mood or behaviour. You are encouraged to ask family and friends to look out for any change in your mood.

Bruising or bleeding

This treatment can reduce the production of platelets which help the blood clot. Tell your doctor if you have any unexplained bruising or bleeding, such as nosebleeds, bloodspots or rashes on the skin, and bleeding gums. You may need a platelet transfusion.

Anaemia (low number of red blood cells)

While having this treatment you may become anaemic. This may make you feel tired and breathless. Let your doctor or nurse know if these symptoms are a problem.

You may need a blood transfusion.

You will have a routine blood test every day while you are in hospital to monitor the effects of the chemotherapy, but please tell your nurse if you experience any of the symptoms listed above.

• Sore eyes

You may get a dry, gritty feeling in your eyes following treatment. If this happens, using hypromellose eye-drops will help ease the discomfort. If the problem persists contact The Christie. Your eyes may also water. This will improve in time and needs no specific treatment.

• Hair loss

You may have total loss of hair, although as patients can be given various strengths of idarubicin not all patients will lose their hair. The hair may fall out gradually 10 to 14 days following your first course of treatment. The time scale varies from person to person, This is a temporary side effect and your hair will grow back when your treatment is completed. Very rarely, hair loss can be permanent.

The cancer information centre offers a coping with hair loss service to all patients. Drop in, phone **0161 446 8100** or email **the-christie.informationcentre@nhs.net**. Information about the wig service can also be found here and vouchers for wigs can also be obtained for eligible patients. The wig room provides a drop in service, please see The Christie leaflet 'The wig fitting service' for further information.

The Maggie's Centre can support you with hair loss by helping you consider the practicalities as well as the emotional impact. Maggie's provides expert care and support to everyone with cancer and those who love them. You can call into Maggie's Monday to Friday, 9am-5pm to speak with their professional team, their address is Maggie's Manchester at The Robert Parfett Building, 15 Kinnaird Road, Manchester, M20 4QL or you can call them on **0161 641 4848** or email **manchester@maggies.org**.

Mild nausea and vomiting (sickness)

You may have mild nausea and vomiting. You may be given anti-sickness tablets to take at home. If you continue to feel or be sick, contact your GP or this hospital. Your anti-sickness medication may be changed or increased.

Lethargy

Some chemotherapy can make you feel tired and lacking in energy. It can be frustrating when you feel unable to cope with routine tasks. If you feel tired, take a rest when necessary. Gentle exercise such as walking can be beneficial.

• Tummy pain

Idarubicin can upset the stomach. This can in some cases cause an ulcer. If you experience pain in the tummy or indigestion, please discuss this with your doctor as they can prescribe a medicine to help protect the stomach. If you notice darker stools or bleeding, speak to your doctor as this medicine can cause bleeding from the bowel.

Uncommon side effects (less than 1 in 10)

Extravasation

Extravasation is when chemotherapy leaks outside of the vein. If you develop redness or soreness at the injection site **at any time** please let us know straight away.

• Skin changes

This chemotherapy can cause itchy skin. If this happens it is important to use an unperfumed cream to help this. Your skin may darken but we would expect this to return to normal once treatment has finished.

You will be more sensitive to sun during treatment and for some time afterwards. It is important that you use a sun protecting moisturiser even when it may not be sunny outside. Speak to your doctor about any changes and they can prescribe creams to help with this.

Rare side effects (less than 1 in 100)

Diarrhoea

If this becomes a problem during or after your treatment, anti-diarrhoea tablets can be prescribed by your doctor. Ask the staff for a copy of 'Eating: help yourself' which has some useful ideas about diet when you are having treatment.

Irregular heart beats

Occasionally this can happen as a result of the idarubicin. It is quite rare if your heart is healthy. Please make sure you tell a doctor if your heart feels different from normal or if you have pains in your chest. Your doctor can prescribe medicine to help with this.

• ATRA 'syndrome'

Rarely the ATRA (trenonoin) may cause you to feel short of breath and you may have a low blood pressure. The nurses will check your blood pressure regularly, but please feel your doctor or nurse if you feel short of breath.

Liver toxicity

Occasionally the treatment may affect the way your liver functions, but this usually returns to normal once your treatment is completed. Your doctor will monitor your liver using blood tests and advise if there are any problems.

Serious and potentially life threatening side effects

In a small proportion of patients chemotherapy can result in very sever side effects which may result in death. The team caring for you will discuss the risk of these side effects with you.

Sex, contraception and fertility (Warning!)

ATRA may cause severe life-threatening birth defects. You must not become pregnant or attempt to get someone pregnant while taking ATRA. To ensure that an unborn baby is not exposed to ATRA your doctor will complete an authorisation form with each prescription. The form documents that you have given consent for treatment with ATRA and have been told about the risks to an unborn baby and the precautions you must take.

Protecting your partner and contraception: We recommend that you or your partner use a barrier form of contraception during sexual intercourse while you are having the course of chemotherapy. Chemotherapy is dangerous to unborn babies and this will also protect you and your partner from any chemotherapy drugs that may be present in semen and the vagina. If you suspect you may be pregnant please tell your doctor immediately.

Fertility: This chemotherapy may affect your ability to have children. Your doctor or nurse should have discussed this with you. If not, please ask them before you start treatment.

Late side effects

Some side effects may become evident only after a number of years. In reaching any decision about treatment, the potential benefit you receive from treatment will be weighed against the risks of serious long term side effects to the heart, lungs, kidneys and bone marrow. With some drugs there is also a small but definite risk or developing another cancer. If any of these problems specifically applies to you, the doctor will discuss these with you and note this on your consent form.

Contacts

If you have any general questions or concerns about your treatment, please ring the haematology team:

Haematology nurse specialists - 0161 918 7962 Haematology and transplant day unit - 0161 446 3924 General enquiries - 0161 446 3000

For urgent advice ring The Christie Hotline on **0161 446 3658** (24 hours a day, 7 days a week).

Your consultant is:
Your hospital number is:
Your kev worker is:

Flu vaccinations

Is it alright for me to have a flu jab during the time I'm having chemotherapy?

It's safe to have a flu jab, but depending on the sort of chemotherapy you have had, it may not give quite as much protection against infection as usual. Some patients may need 2 vaccinations. However, if you're thinking of having any other vaccinations, do check with your Christie doctor first, because some vaccines should be avoided.

COVID-19 vaccinations

We advise that all patients receive a COVID-19 vaccination when this is offered. Your doctor will discuss with you the best time to have this.

Notes:

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If you need information in a different format, such as easy read, large print, BSL, braille, email, SMS text or other communication support, please tell your ward or clinic nurse.

The Christie is committed to producing high quality, evidence based information for patients. Our patient information adheres to the principles and quality statements of the Information Standard. If you would like to have details about the sources used please contact **the-christie.patient.information@nhs.net**

For information and advice visit the cancer information centres at Withington, Oldham, Salford or Macclesfield. Opening times can vary, please check before making a special journey.



Contact The Christie Hotline for urgent support and specialist advice

The Christie Hotline: 0161 446 3658

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April 2025 – Review April 2028 CHR/HTU/CT/524/28.06.07 Version 6 The Christie Patient Information Service Tel: 0161 446 3000 www.christie.nhs.uk