

# Docetaxel (Taxotere) & Gemcitabine (Sarcoma)

The possible benefit of this treatment is that it may control the cancer and its symptoms. Chemotherapy is the most commonly prescribed anti-cancer treatment but other types of treatment are also used. 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 which includes the chemotherapy

### Cycle 1 Day 1

Premedication (anti-histamine and steroid) 30 minutes prior to Olaratumab  
Olaratumab IV over 60 minutes  
Doxorubicin IV over approximately 30 minutes

### Cycle 1 Day 8

Premedication 30 minutes prior to Olaratumab  
Olaratumab IV over 60 minutes

Doxorubicin will be administered for a maximum of 6 cycles.  
Olaratumab may be continued until disease progression.

Before treatment begins we will ask you to have a heart function test. We will repeat this before cycles 4, 5 and 6 and at the end of treatment.

You will have a routine blood test before the start of each cycle of treatment.

Occasionally we may not be able to go ahead with your treatment until your blood counts are back to a safe level. If this happens, your chemotherapy may be delayed a week.

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 (Warning!)

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)

### • Infusion related reactions

Sometimes side effects can occur while you are having the infusion. These may include chills, fever and shivering or shortness of breath. If you have any of these side effects please tell your nurse straightaway, however, your progress will be monitored regularly. If this happens or you notice any swelling around the eyes and face, feel dizzy or faint, or have any shortness of breath during the treatment, please tell the nurse or doctor immediately. This may be an allergic reaction and the drip may need to be slowed down or stopped. You may feel tired or have a headache. These symptoms are related to your treatment and usually go when the infusion has finished.

If you do have any reactions to your treatment, we may be able to give you medication to prevent this on your next infusion.

### • Aching in the muscles/bones

Sometimes you may have pain in the muscles or bones. Please ask your doctor about this who may prescribe a suitable painkiller.

### • Lethargy

Some chemotherapy may make you feel tired and lacking in energy. It can be frustrating when you feel unable to cope with routine tasks. If you do feel tired, take rest and get help with household chores. If necessary, take time off work. Gentle exercise such as walking can be beneficial. You may find the booklet 'Exercise during and after treatment' helpful. This can be obtained from the cancer information centre.

### • 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.

### • Bruising or bleeding

This treatment can reduce the production of platelets which help the blood clot. Let your doctor know 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.

### • Nausea and vomiting (sickness)

The severity of this varies from person to person. We will give you anti-sickness medication along with your chemotherapy to prevent this. You will also be given anti-sickness tablets to take at home. If you

continue to feel or be sick, contact your GP or this hospital, because your anti-sickness medication may need to be changed or increased.

### • Sore mouth

Your mouth may become sore or dry, or you may notice small mouth ulcers during this treatment. Drinking plenty of fluids and cleaning your teeth regularly and gently with a soft toothbrush can help to reduce the risk of this happening. We can prescribe a mouthwash for you to use during treatment. You can dilute this with water if your mouth is sore. Ask your doctor or nurse for further advice. There is also general mouth care information in the chemotherapy booklet. If you continue to have a sore mouth, please contact The Christie Hotline.

Occasionally during treatment you may experience a strange taste sometimes described as metallic or bitter. A strongly flavoured sweet or mint will help to disguise this.

### • Diarrhoea

If this becomes a problem while you are having treatment, anti-diarrhoea tablets can be bought from a pharmacy or prescribed by your GP for a temporary period until this is resolved. Ask staff for a copy of The Christie booklet 'Eating - help yourself' which contains some useful ideas about diet when you are having treatment.

### • Hair loss

Hair loss is usually total. The hair falls out gradually 3 - 4 weeks following your first course of treatment. The time scale varies from person to person. Please remember that 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 where support, information and advice will be given. Drop in, contact **0161 446 8100** or email [informationcentre@christie.nhs.uk](mailto:informationcentre@christie.nhs.uk). 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 runs a Talking Heads hair loss support workshop for anyone who is anticipating or experiencing hair loss (both men and women). These sessions cover the practicalities of hair loss as well as offering support with its emotional impact. Contact Maggie's on **0161 641 4848** or email [manchester@maggiescentres.org](mailto:manchester@maggiescentres.org).

### • Skin and nail changes

**Skin changes:** The skin on your hands and feet may become very dry, red and sore with some cracking. Tell your doctor. Cream and tablets can be prescribed to help. Your chemotherapy dose may need to change. Try to keep your hands and feet cool and if possible, uncovered.

**Hyperpigmentation:** Your skin may appear darker in colour or lightly tanned, especially around the joints. This is known as hyperpigmentation. Asian and African-Caribbean people may develop noticeable light patches on their skin. The skin will return to normal when treatment is finished.

**Increased sensitivity to the sun:** Your skin will tan or burn in the sun more easily. Sit in the shade, avoid too much sun and use sunblock cream and wear a hat.

### • Red urine

Doxorubicin, because of its red colour, may discolour your urine red or pink for 24 to 48 hours following treatment. This is normal and nothing to worry about.

- **Headache**

You may experience headaches with this treatment. Please ask your doctor about this, who may prescribe a suitable painkiller.

## **Uncommon side effects (less than 1 in 10)**

- **Weakness of the heart**

Doxorubicin can affect your heart. It can weaken the heart muscle. This is uncommon and is associated with increasing the dose of the treatment. Your treatment will not exceed the maximum dose. You will have a medical assessment of the function of your heart before, during and after starting this chemotherapy.

- **Extravasation**

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

- **Herbal medicine**

Some herbal medicine including St John's Wort can affect the chemotherapy. You should let your doctor or nurse know if you are taking any herbal medication, complementary or alternative medicines, including vitamins, minerals and medicines purchased over-the-counter.

## **Rare side effects (less than 1 in 100)**

### **Serious and potentially life threatening side effects**

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

### **Sex, contraception and fertility**

**Protecting your partner and contraception:** We recommend that you or your partner use a condom 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 in the vagina. If you suspect that 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 with you 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 of 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 area where you are having treatment:

Administrative enquiries - **0161 918 7606 / 7610**

Chemotherapy nurse - **0161 918 7171**

Sarcoma clinical nurse specialist - **0161 446 3094**

Secretary to Dr Leahy and Dr Horsley - **0161 446 8384**

For advice ring The Christie Hotline on **0161 446 3658** (24 hours)

Your consultant is: .....

Your hospital number is: .....

Your key worker is: .....

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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 **patient.information@christie.nhs.uk**

For information and advice visit the cancer information centres at Withington, Oldham or Salford. 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**  
Open 24 hours a day, 7 days a week