



Pemetrexed (Alimta®)

This leaflet is offered as a guide to you and your family. The possible benefits of treatment vary; for some people chemotherapy may reduce the risk of the cancer coming back, for others 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 have about your treatment. 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 has prescribed for you a treatment which includes the chemotherapy pemetrexed (Alimta®) into the vein via a drip.

The treatment consists of the following:

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| Day 1 | Pemetrexed (Alimta®) by drip over 10 minutes |
| Day 15 | No treatment. We may ask you to attend for a clinic visit |
| Day 21 | Restart with the next cycle (Day 1) |

The treatment is repeated every 3 weeks for a total of 4 cycles.

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

Remember to take your dexamethasone tablets twice daily for three days (take the first dose in the morning with breakfast and take the second dose at lunchtime).

Start taking the dexamethasone the day before your chemotherapy. This is important – dexamethasone helps to prevent allergic reactions to the chemotherapy. If you forget, tell your chemotherapy nurse before you have treatment.

- **Folic Acid** tablets need to be taken continuously throughout treatment, this will start at least 5 days before the chemotherapy.
- You will also have an injection of **Vitamin B12** every 9 weeks. This will start the week before the chemotherapy or on the first day of chemotherapy treatment.
- Anti-inflammatory drugs (ibuprofen, diclofenac etc) should be discontinued.

• Blood sugar

Dexamethasone can cause your blood sugar to rise. If you are diabetic then you may need to increase the dose of any diabetic medication you take (insulin or tablets). You should discuss this with your doctor before starting the chemotherapy. Dexamethasone can also induce diabetes in people not known to have this disease. This is normally reversible although you may need to take some diabetic medication while you are having chemotherapy. More frequent monitoring of your blood sugar levels may be necessary.

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.

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)

- **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.

- **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.

- **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.

- **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.

Uncommon side effects (less than 1 in 10)

- **Nausea and vomiting (sickness)**

The severity of this varies from person to person. Anti-sickness medication may be given along with your chemotherapy to prevent this. You may 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.

- **Loss of appetite**

If you experience a loss of appetite, please be sure to tell your doctor or nurse at your next hospital visit.

- **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. If the problem persists contact this hospital. **If you develop severe diarrhoea it is important to contact this hospital straightaway as this may be a sign of a serious infection. Don't delay!**

- **Skin rash**

You may develop a skin rash. This is usually mild and easily treated. Please tell your doctor on your next visit. If the skin rash is serious, please phone The Christie Hotline.

- **Possible hair thinning**

You may lose your hair although this is not usually total hair loss. The hair falls out gradually 10 to 14 days 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. If you would like an appointment with the wig service, this can be arranged for you. Ask the staff for a copy of the 'Wig Fitting Service at the Christie'.

- **Strange taste**

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.

- **Constipation**

Try to drink plenty of fluids and eat foods high in fibre. Report this to your hospital doctor who may prescribe a suitable laxative. Ask the staff for a copy of Eating: Help Yourself which has useful ideas about diet when you are having treatment.

- **Tingling & numbness in the fingers or toes**

Usually only mild and temporary. Please report these symptoms to your doctor on your next hospital visit. On rare occasions, this may be permanent.

Rare side effects (less than 1 in 100)

- **Chest pain**

If you experience chest pain, please tell your doctor or nurse so you can discuss treatment options.

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 & 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:

- Administration enquiries 0161 918 7606/7610
- Chemotherapy nurse: 0161 918 7171
- Clinical trials unit 0161 918 7663

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

- Jackie Fenemore, Lung Cancer Clinical Nurse Specialist 0161 446 3018
Emma Halkyard, Lung Cancer Clinical Nurse Specialist 0161 918 7473
- Your doctor's secretary0161 446.....

For urgent 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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Details of the sources used are available, please contact Patient.Information@christie.nhs.uk

The Christie Hotline 0161 446 3658