

# Cetuximab (Colorectal Cancer)

This leaflet is offered as a guide to you and your family. Cetuximab is a type of anti-cancer treatment called targeted therapy. The possible benefits of treatment vary; for some people this treatment may reduce the risk of the cancer coming back, for others it may control the cancer and its symptoms. Your doctor or nurse will be happy to answer any questions you have about your treatment.

## Your treatment

Your doctor or nurse clinician has prescribed for you a treatment which includes the monoclonal antibody Cetuximab. This treatment can be given in combination with chemotherapy or on its own.

**Day 1** Cetuximab by drip over 2 hours for the first dose.  
Subsequent doses may be given over 1 hour.  
Treatment is most commonly repeated every 2 weeks.

Alternatively a higher dose of treatment may be given once every 2 weeks.

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

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

This treatment 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)

- **Skin reaction**

The commonest reaction is an acne-like rash that can commonly affect the face, back, chest and arms. The rash often starts within the first 3 weeks of treatment and in most patients has settled down by 12 weeks after the treatment has started. You will be prescribed steroid skin creams and tablet antibiotics which often help to reduce the severity of the rash. Using a sunscreen with high UV protection can also help. Sometimes the cetuximab may not be given for 1-2 weeks to allow the skin to improve.

Patients who continue on cetuximab for long periods of time sometimes complain of itching, dry skin.

- **Eye problems**

You may experience inflammation of the eyelids; conjunctivitis; your eyelashes may grow longer; you may produce excessive tears or have red, dry or itchy eyes.

- **Nail problems/ infections**

Pain and redness at the edges of finger or toenails can be a sign of infection and will require treatment with antibiotics.

- **Flu like symptoms**

Mild symptoms of fevers, chills, and nausea can occur at the time of the infusion and normally quickly resolve. Fatigue or tiredness is also quite common.

- **Diarrhoea**

Diarrhoea is a common side effect of your treatment. If you have watery diarrhoea you should immediately take the anti-diarrhoea treatment that the doctor has prescribed for you. This is the loperamide dispensed by The Christie pharmacy. Follow the doctor's instructions **EXACTLY**:

Take 2 loperamide capsules as soon as the first liquid stool occurs. Then take one capsule with each liquid loose stool. (The maximum dose of loperamide in a day is 8 capsules). **If you have a stoma or notice capsules in stoma output – you should ask for tablets rather than capsules.**

If you have an increase of more than 4 bowel movements each day or any diarrhoea at night, please ring The Christie Hotline on **0161 446 3658** for advice.

If you continue to have more than 4 bowel movements a day (compared to pre-treatment) or bowel movements during the night, please ring The Christie Hotline for advice.

- **Low magnesium**

Magnesium is a blood salt that can become low after several weeks of treatment with cetuximab. The commonest symptoms this can cause are weakness and muscle cramps and rarely can cause confusion or heart problems. The magnesium levels in your blood will be closely monitored and supplements can be given if the level falls below normal.

High magnesium foods include dark leafy greens, nuts, seeds, fish, beans, whole grains, avocados, yogurt, bananas, dried fruit and dark chocolate.

- **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, because your anti-sickness medication may need to be changed or increased.

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

- **Allergic reaction**

Occasionally allergic reactions can occur whilst you are receiving the Cetuximab drip in hospital. This can result in symptoms of a rash, dizziness, wheeze, shortness of breath, and loss of consciousness. Before receiving Cetuximab all patients are given treatment to reduce the risk of a reaction occurring. If you develop an allergic reaction the drip will be stopped and further treatment will be given to help the reaction settle.

Serious infusion reactions occurred in approximately 3% of patients in clinical trials, with a fatal outcome reported in less than 1 in 1,000.

- **Lung toxicity**

Interstitial lung disease (ILD) is excessive, unnatural inflammation of the lungs and is a rare toxicity occurring in less than 1 in 200 patients. You may experience a trouble-some, persistent cough and severe breathing difficulties which can rarely be fatal. In patients who already have interstitial pneumonitis or pulmonary fibrosis, the benefits of therapy versus the risk of lung complications will be specifically discussed with your doctor.

### **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)

Your consultant is: .....

Your hospital number is: .....

Your key worker is: .....

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.

We try to ensure that all our information given to patients is accurate, balanced and based on the most up-to-date scientific evidence. If you would like to have details about the sources used please contact **patient.information@christie.nhs.uk**

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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

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