



## Cisplatin and Capecitabine (Upper GI)

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 or nurse clinician has prescribed for you a treatment with cisplatin and capecitabine. The treatment consists of the following:

- Day 1** Cisplatin by drip over            hours. Given with plenty of fluid.
- Days 1 to 14** Capecitabine tablets by mouth.  
Take the tablets twice a day with water, within half an hour of food.
- Days 15 to 20** No chemotherapy
- Day 21** Restart with the next cycle.

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

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.**



- **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.

You will have a routine blood test before each treatment to monitor the effects of the chemotherapy. Occasionally we may not be able to go ahead with your treatment until your blood cells are back to a safe level. In this case your chemotherapy will usually be put back a week.



- **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.

## Other possible side effects

Chemotherapy can cause many different side effects. Some are more likely to occur than others. Everybody 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)

- **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 The Christie Hotline for advice.**



- **Kidney damage**

It is important to monitor how your kidneys are working while you are having treatment as the cisplatin can put a strain on them. Before you start the treatment you will need to have a test called a GFR. This is performed in the Nuclear Medicine Department and consists of an injection followed by series of blood tests. The GFR will be repeated before alternate cycles of the chemotherapy. Your routine blood tests will also give us an idea of how well your kidneys are working. It is important to drink plenty of non-alcoholic fluids (at least 8 cups or 4 pints per day) during your course of chemotherapy.

### Diarrhoea



If you are taking capecitabine tablets and you have diarrhoea (more than 4 times in a day or once during the night) stop taking the tablets and contact The Christie Hotline immediately. **If you develop severe diarrhoea it is important to contact The Christie Hotline straight away as this may be a sign of a serious infection. Don't delay!**

It is important to drink plenty of fluids (at least 8 cups) the day before and for a few days after chemotherapy.

- **Constipation**

You may become constipated during this treatment. Try to drink plenty of fluids and eat foods high in fibre. Ask the staff for a copy of 'Eating: Help Yourself' which has useful ideas about diet when you are having treatment. You will be prescribed some laxatives but if these are not working, please tell us.



- **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. You should keep your mouth very clean using a mouthwash of sodium bicarbonate and saltwater (sodium chloride). You can take soluble paracetamol to help with the soreness. Ask your doctor or nurse for advice. The chemotherapy booklet also has general mouthcare advice.

**If your sore mouth is preventing you eating and drinking, please contact The Christie Hotline for advice.**

- **Fatigue**

It is common to become tired and lacking in energy with this chemotherapy. You may feel you need to rest for a while during the day. You may need help with the household chores. It is a good idea to do some gentle exercise; even a walk round the block can help.

- **Metallic taste in the mouth**

You may have a strange or metallic taste in your mouth during treatment. Sucking a mint or other strongly flavoured sweet may help.

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

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

This is only usually mild and temporary but sometimes lasts for some time or becomes permanent. Please report these symptoms to your doctor on your next hospital visit.

- **Tinnitus & high frequency hearing loss**

You may develop tinnitus (ringing in the ears). This sensation should subside when your treatment finishes but may be permanent. High frequency hearing loss can also occur with this chemotherapy. This may be permanent.

- **Sore hands and feet (palmar-plantar erythema):**

The skin on your hands and feet may become very dry, red and sore with some cracking. Cream and tablets can be given which can help. Use a moisturiser on your hands and feet. Your chemotherapy dose may need to change. Try to keep your hands and feet cool and if possible, uncovered. If the skin become very sore or starts to peel, please ring The Christie Hotline

- **Nail changes**

Your nails may become brittle and ridged. The skin on the sides of your nails may become red and sore.

- **Pain in the joints and back**

You can take painkillers such as paracetamol for this. Let your doctor or nurse know about the pain when you next visit the hospital.

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



- **Blood clots**

During chemotherapy you are more at risk of blood clots in the legs (DVT) or lungs (PE). Occasionally these clots can be life-threatening. To help prevent clots, keep mobile and drink plenty of non-alcoholic fluids.



- **Chest pain or stroke**

A small number of patients receiving 5-Fluorouracil (5FU) or capecitabine can experience chest pain (angina) or rarely have a heart attack. Extremely rarely this may lead to death. Other complications such as stroke or mini-stroke can happen but are exceptionally rare. If you develop any of these symptoms you should contact your hospital doctor for advice. In an emergency you should go immediately to your nearest accident and emergency department.

- **Hair thinning**

Some hair loss may occur during treatment although this is unlikely. It is advisable to avoid perms, colours, use of hot brushes and vigorous, frequent washing that could increase hair loss. 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.'

- **Watery eyes**

This will improve in time and needs no specific treatment.

### **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: .....



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Details of the sources used are available, please contact [Patient.Information@christie.nhs.uk](mailto:Patient.Information@christie.nhs.uk)