

Panitumumab (Colorectal Cancer)

This leaflet is offered as a guide to you and your family. Panitumumab is a type of anti-cancer treatment called targeted therapy. The possible benefits of treatment vary; for some people it 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 Panitumumab. This treatment can be given in combination with chemotherapy or on its own.

Day 1 Panitumumab by drip over 60-90 minutes.
Subsequent treatments can be given over 30 minutes if well-tolerated.
Treatment is repeated every two 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)

- **Lethargy**

This treatment may make you feel tired and lacking in energy. It can be frustrating when you feel unable to cope with routine tasks. You may benefit from additional support during your treatment. Complementary therapies may be helpful. Speak to your nurse or doctor for further information. If necessary, take time off work. Gentle exercise, such as walking, can be beneficial.

- **Skin reaction**

The commonest reaction is an acne-like rash that can 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 panitumumab may not be given for 1-2 weeks to allow the skin to improve.

Patients who continue on panitumumab for long periods of time sometimes complain of itching, dry skin and that their eyelashes grow longer.

- **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.

- **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 your stoma output **you should ask for tablets rather than capsules.**

If you have an increase of more than 4 bowel movements each day (compared to pre-treatment) or any diarrhoea at 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 panitumumab. 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.

- **Loss of appetite**

If you experience a loss of appetite, please be sure to tell your doctor or nurse at your next hospital visit. The Christie booklet 'Eating: help yourself' contains useful information about diet while you are having treatment.

- **Conjunctivitis**

Your eyes may become sore or infected. If this happens, speak to your doctor.

Uncommon side-effects (less than 1 in 10)

- **Allergic reaction**

Occasionally allergic reactions can occur whilst you are receiving the panitumumab drip in hospital. This can result in symptoms of a rash, dizziness, wheeze, shortness of breath, and loss of consciousness. Before receiving panitumumab 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.

- **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 troublesome, 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**

© 2017 The Christie NHS Foundation Trust. This document may be copied for use within the NHS only on the condition that The Christie NHS Foundation Trust is acknowledged as the creator.

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

The Christie NHS Foundation Trust
Wilmslow Road
Withington
Manchester M20 4BX
Tel: 0161 446 3000
www.christie.nhs.uk

The Christie Patient Information Service
July 2017 – Review July 2020

