



Sorafenib (Nexavar[®])

For thyroid carcinoma

This leaflet is offered as a guide to you and your family. Sorafenib is a type of anti-cancer treatment called a targeted therapy. The aim of this treatment is to control the cancer and its symptoms. Your doctor or nurse will be happy to answer any questions you may have about your treatment.

Your treatment

Your doctor has prescribed a course of treatment with sorafenib (Nexavar[®]). Sorafenib is taken by mouth as tablets twice a day and is taken every day without a break. This treatment can be repeated for as long as you are benefitting from it and the side effects are tolerated.

Your tablets should be taken daily at approximately the same time every day. It is best to take the tablets in the morning and evening without food (or, at least 1 hour before or two hours after a meal). If you do take these tablets with meals, we advise you to avoid high fat foods as this can reduce the effectiveness of the tablets. If you miss a dose, take your next planned dose when it is due.

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.

Drug interactions

Some medicines interact with sorafenib, either making it less effective or more likely to cause side effects. Please check with your GP and pharmacist that any new medicines are safe, or seek advice from the thyroid team. Drugs which should be avoided include itraconazole, fluconazole, ketoconazole, rifampicin, clarithromycin, erythromycin, high dose steroids and warfarin. If you are in any doubt please contact The Christie. Please do not drink any grapefruit juice or eat grapefruit while you are taking sorafenib. St John's Wort should also be avoided.

Possible side effects

Sorafenib 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. If side effects are severe, you may need to stop your tablets, have a break from treatment or have a dose reduction. A small number of people do not tolerate treatment.

Common side effects (more than 1 in 10)

- **Hand/foot skin reaction**

Some patients experience reddening and peeling of the skin on the hands and feet. Simple moisturisers can help if this is mild, but if it interferes with walking or normal use of hands or fingers, please contact The Christie Hotline.

- **Diarrhoea**

Mild diarrhoea is common. Anti-diarrhoeal tablets (loperamide) can be prescribed to control your symptoms. Severe diarrhoea is less common. If you develop diarrhoea with an increase in stool frequency of four or more times above your normal daily bowel function, please contact The Christie Hotline.

- **Hair changes**

It has been reported that some people may experience some hair thinning or changes in their hair colour. This is a temporary effect and should return to normal after you stop taking the medication.

- **Decreased appetite and weight loss**

We advise you to try and eat and drink as normal. Your weight will be monitored at your outpatient appointments.

- **Hypertension (high blood pressure)**

Your blood pressure will be checked at each clinic appointment. If you develop hypertension, the team will discuss commencing medication to control your blood pressure. Occasionally, we will need to stop your sorafenib if your blood pressure remains uncontrolled despite medication. It is rare for patients to experience any serious heart problems.

- **Mucositis (sore mouth and mouth ulcers)**

Sorafenib can cause a sore mouth and mouth ulcers. Usually this is mild and responds to mouth washes. If it is severe enough to stop you eating and drinking normally, please contact The Christie.

- **Tiredness**

Sorafenib may make you feel tired and lacking in energy, but it should not affect your daily routine. Try to take rest and get help with household chores. If necessary take time off work. Gentle exercise such as walking can be beneficial.

- **Indigestion**

Some patients experience indigestion which can be treated with tablets.

- **Nausea and vomiting**

This is not a common problem but, if this does occur, you can be prescribed some anti-sickness tablets by your doctor.

- **Delayed wound healing**

Sorafenib may delay wound healing. **The tablets will usually have to be stopped before and after surgery or dental extraction**, and should not usually be taken if you have an open wound, leg ulcer or pressure sore. Please inform your doctor or dentist that you are taking sorafenib and alert The Christie thyroid team of any planned medical or dental procedures so they can advise about stopping sorafenib.

- **Prone to bleeding**

Sorafenib can make you prone to bruising and bleeding, for example, bleeding from the nose, gums or in the urine. Contact The Christie Hotline if this occurs. A small number of patients may experience serious bleeding complications.

Uncommon side effects (less than 1 in 10)

- **Anaemia**

While having this treatment you may become anaemic. This may make you feel tired and breathless. We will take a blood sample at every clinic appointment and monitor your blood counts

- **Rash**

Sorafenib will make you more sensitive to the sun and can cause a rash. The rash often settles during treatment. If this is widespread, please contact The Christie. More rarely some patients can develop a similar rash in the groin.

- **Liver and kidney problems**

This medication can affect the way your liver and kidneys function. We will request a blood sample at every clinic appointment.



Rare side effects (less than 1 in 100)

- **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, if you have symptoms of an infection or if your temperature is 37.5°C or above or below 36°C contact The Christie Hotline straight away.

- **Stevens-Johnson Syndrome**

This is very rare. It is a severe reaction to your medication that causes ulcers, blistering and peeling of the skin and surfaces of the eyes, mouth and throat. It may be associated with a cough which produces a thick sputum, headache and joint pain. You should contact The Christie Hotline or seek emergency medical care.

Serious and potentially life-threatening side effects

In a small proportion of patients anti-cancer therapy 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.

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.

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 this treatment. This treatment is dangerous to unborn babies and this will also protect you and your partner from any 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 treatment 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.

Contacts

If you have any general questions or concerns about your treatment, please contact the thyroid team.

- Administration enquiries 0161 446 3331
- Clinical Nurse Specialist, Debbie Elliott 0161 446 8041

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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www.christie.nhs.uk Tel: 0161 446 3000

Details of the sources used are available, please contact patient.information@christie.nhs.uk