

# Weekly gemcitabine and concurrent bladder radiotherapy

The possible benefit of treatment vary; for some people this chemotherapy may reduce the risk of the cancer coming back, for others it may control the cancer and its symptoms. 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 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, nurse clinician or specialist radiographer has prescribed for you a course of gemcitabine with your planned bladder radiotherapy.

The treatment plan consists of:

### Weeks 1 to 4:

An infusion over 30 minutes once a week on a Tuesday morning for 4 weeks during your radiotherapy treatment.

We will ask you to have a blood test the day **before** each chemotherapy treatment.

On Tuesdays, you will need to attend the outpatient department at The Christie about **3 hours** before your radiotherapy appointment. This is to ensure that you are seen by the medical team before your chemotherapy is given. Your radiotherapy treatment will be given approximately 2 hours after your chemotherapy.

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.



## Combining radiotherapy and chemotherapy

Studies have shown that giving gemcitabine with radiotherapy makes the radiotherapy more effective in treatment for bladder cancer. Gemcitabine is a chemotherapy drug and may affect your blood count and cause side effects. You will be receiving a much lower dose of this drug during your radiotherapy - so we do not anticipate any major side effects seen with this drug when it is given at its normal dose. The side effects from radiotherapy may be increased by the gemcitabine. The Christie booklet 'Radiotherapy to the bladder' describes these side effects. You will be seen by your medical team each week.

## Radiotherapy

Radiotherapy involves aiming high energy X-rays at the tumour in order to kill cancer cells. The radiotherapy treatment is carefully planned so as to destroy the tumour and keep side effects to a minimum. Side effects you may notice from your radiotherapy include:

- passing urine more frequently and/or stinging on passing urine
- looseness of the bowels
- tiredness.

These are usually only temporary changes. Further information about the side effects of radiotherapy are available in The Christie booklet 'Radiotherapy - a guide'. Ask your doctor, research nurse or radiographer for a copy. Please ask your doctor any questions you may have concerning the side effects of radiotherapy or treatment regimen.

**When you have gemcitabine and radiotherapy the above side effects may be worse. If these are severe then we will stop the treatment with gemcitabine but radiotherapy may continue.**

## 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)

### • Upset bowels

You may get upset bowels with this chemotherapy:

**Diarrhoea** If this is a mild 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 or becomes severe, do not delay in contacting The Christie.

**Constipation** Try to drink plenty of fluids and eat foods high in fibre. Report this to your Christie doctor you may prescribe a suitable laxative.

Ask the staff for a copy of The Christie booklet 'Eating - help yourself' which has useful ideas about diet when you are having treatment.

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

### • 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.

- **Breathlessness**

Very rarely, this chemotherapy can cause inflammation of your lungs. This can make you breathless. Tell your doctor if you develop this problem while you are having this chemotherapy. Stopping the chemotherapy and taking steroids will help.

- **Fluid retention**

Your feet/legs may become swollen whilst on this chemotherapy. If this is mild, no specific treatment is needed. Keeping your legs raised may help. Tell your doctor if the swelling is severe.

- **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 sick, contact your GP or this hospital, your anti-sickness medication may need to be changed or increased.

- **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.

- **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. Very rarely, hair loss can be permanent.

The cancer information centre offers a coping with hair loss service to all patients where support, information and advice will be given. Drop in, contact **0161 446 8100** or email [informationcentre@christie.nhs.uk](mailto:informationcentre@christie.nhs.uk). Information about the wig service can also be found here and vouchers for wigs can also be obtained for eligible patients. The wig room provides a drop in service, please see The Christie leaflet 'The wig fitting service' for further information.

The Maggie's Centre runs a Talking Heads hair loss support workshop for anyone who is anticipating or experiencing hair loss (both men and women). These sessions cover the practicalities of hair loss as well as offering support with its emotional impact. Contact Maggie's on **0161 641 4848** or email [manchester@maggiescentres.org](mailto:manchester@maggiescentres.org).

- **Flu-like symptoms**

Some chemotherapy may cause flu-like symptoms such as fever, aches and pains and shivering about 3 to 5 hours after it is given. These symptoms should be temporary and should go within 12 to 24 hours. Paracetamol will help. If your symptoms are particularly severe, tell your doctor on your next visit.

- **Skin rash**

You may develop a skin rash. This is usually mild and easily treated. Please tell your doctor on your next visit.

## 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 and 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: Urology specialist radiographer - **0161 918 2096** or **0161 446 3000** (bleep 12576)

Notes:

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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.

The Christie is committed to producing high quality, evidence based information for patients. Our patient information adheres to the principles and quality statements of the Information Standard. If you would like to have details about the sources used please contact **the-christie.patient.information@nhs.net**

For information and advice visit the cancer information centres at Withington, Oldham or Salford. Opening times can vary, please check before making a special journey.



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urgent support and specialist advice  
**The Christie Hotline: 0161 446 3658**  
Open 24 hours a day, 7 days a week