

Cisplatin and vinorelbine

The possible benefits 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 have about your treatment. You will find it useful to refer to the booklet *Chemotherapy*, a guide which gives information on chemotherapy and side effects.

Your treatment

Your doctor has prescribed a regimen of treatment for you with cisplatin and vinorelbine. Cisplatin is given into the vein via a drip and Vinorelbine is given as an infusion via a syringe.

Day 1 Cisplatin via a drip and an infusion of vinorelbine approximately 6 hours in total

Day 8 Infusion of vinorelbine approximately 1 hour visit.
(Sometimes this can also be given in oral capsule form but this is less likely at this treatment centre)

Day 15 Blood test, an X-ray and clinic visit

Day 21 Restart with the next cycle (day 1 cycle 2)

Treatment is given every 3 weeks for 4 cycles.

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.

After Cycle 2 of treatment, if clinically possible you will have your treatment at a location closer to home. The Christie is committed to providing treatment closer to home as part of the Outreach and Christie at Home service.

We strongly advise current smokers to stop smoking while having this treatment. If you would like help with stopping smoking, please let your doctor or nurse know and they can arrange support for you.

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.



Kidney function (Warning!)

It is important to monitor how your kidneys are working while you are having treatment. We will do this through routine blood tests, or a GFR test (most accurate test of kidney function). It is important to drink plenty of fluids (about 2 litres) the day before and for a few days after chemotherapy.

• 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. You may be given injections or antibiotics to help reduce the risk of having a serious infection.

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.

Flu vaccinations

Is it alright for me to have a flu jab during the time I'm having chemotherapy?

It's safe to have a flu jab, but depending on the sort of chemotherapy you have had, it may not give quite as much protection against infection as usual. Some patients may need two vaccinations. However, if you're thinking of having any other vaccinations, do check with your Christie doctor first, because some vaccines should be avoided.

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)

• 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

• Nausea and vomiting (sickness) (Warning!)

The severity of this varies from person to person. Anti-sickness medication will be given along with your chemotherapy to prevent this. You will also 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, and you may need extra fluid through a drip.

• 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 a daily walk can be beneficial.

• Upset bowels

You may get upset bowels with this chemotherapy:

Diarrhoea If this becomes a 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 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!**

Constipation This can be caused by vinorelbine or by the anti-sickness medication called Ondansetron. If you are prone to constipation or you become constipated, try to drink plenty of fluids and eat foods high in fibre. Tell your doctor who may prescribe a suitable laxative. Ask the staff for a copy of 'Eating - help yourself' leaflet which has useful ideas about diet when you are having treatment. We will prescribe you laxatives when you receive your treatment to use if you develop constipation.

• Vein pain

Vinorelbine can cause pain along the vein during and after treatment. This should only be temporary, but contact your hospital doctor or nurse if this becomes severe.

• 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. Information about the wig service can also be found here and vouchers for wigs can also be obtained for eligible patients. The wig room also 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.

• 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. We can prescribe a mouthwash for you to use during treatment. You can dilute this with water if your mouth is sore. Ask your doctor or nurse for further advice. There is also general mouth care information in the chemotherapy booklet. If you continue to have a sore mouth, please contact **The Christie Hotline** on **0161 446 3658**.

• Tinnitus and high frequency hearing loss

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

• Kidney function

There is a very small risk of damage to the kidneys from this treatment. Your kidney function will be closely monitored with a blood test at each clinic visit.

Less common side effects (less than 1 in 10)

- **Strange taste**

Occasionally during treatment you may experience a strange taste, sometimes described as metallic or bitter. A strongly flavoured sweet or mint will help to disguise this.

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

This is only usually mild and temporary. Please report these symptoms to your doctor on your next hospital visit. On rare occasions, this may be permanent.

- **Joint and muscle pain**

Pain in the joints (also called arthralgia) or muscles (also called myalgia) can be a temporary side effect while having chemotherapy. It is important to tell your doctor about this, so that appropriate painkillers can be prescribed.

Rare side effects (less than 1 in 100)

- **Blood clots (Warning!)**

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

- **Extravasation**

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 straightaway.

- **Chest pain (Warning!)**

A small number of patients receiving this treatment can experience chest pain (angina) or rarely have a heart attack. 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.

- **Cardiotoxicity (Warning!)**

This treatment can affect the way the heart works but this is usually temporary. You may have tests to see how well your heart is working before, during and sometimes after treatment.

If you have pain or tightness in your chest, feel breathless or notice changes to your heartbeat at any time during or after treatment, tell a doctor straight away. These symptoms can be caused by other conditions but its important to get them checked by a 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.

Other medicines:

Please ask your doctor at The Christie for advice about any other medication you are taking, including non prescribed medicines, complementary therapies and herbal medicines.

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.

For female patients:

Loss of periods

Due to the effect of chemotherapy on the ovaries, you may find that your periods become irregular or stop. This is more likely in women over the age of 40 when most women will notice some change in their periods. It is less common in women under the age of 40 but does still happen and can result in significant menopausal symptoms (see section below). Even if your periods stop completely during chemotherapy your periods may come back several years later. This means that you may be able to become pregnant even many years after chemotherapy. It is very important to use contraception if you don't want to get pregnant.

Menopausal symptoms

When the ovaries stop working due to chemotherapy or during a natural menopause most women experience symptoms such as hot flushes, sweats (night and day) and vaginal dryness. These hormonal changes can make the vagina feel as though it has shrunk and become less easy to stretch. This is called vaginal atrophy and can result in discomfort, pain on sexual intercourse, itching and recurrent urine infections. If your ovaries don't start to work again the vaginal symptoms can be permanent, although the flushes and sweats tend to reduce and stop over a small number of years. Some women who have already gone through menopause may notice their symptoms worsening for a time after chemotherapy.

The vaginal symptoms can start early and the longer they are left the harder they can be to treat. Please contact your specialist nurse either in clinic or by phone when the symptoms first develop if you would like help. Symptoms can be managed in several ways including gels, essential oil pessaries and sometimes local oestrogen replacement. You may also find it helpful to request the booklet 'Menopausal symptoms and breast cancer' by Breast Cancer Now (either from your specialist nurse, The Information Centre at The Christie, or online).

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**

Lung cancer nurse team - **0161 918 2595**

For urgent advice ring The Christie Hotline on **0161 446 3658** (24 hours)

Your doctor's secretary**0161**

Your consultant is:

Your hospital number is:

Your key worker is:

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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.



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