

# Cisplatin and fluorouracil (urology)

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 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 quide' which gives general information on chemotherapy and side effects.

#### Your treatment

Your doctor or nurse clinician has prescribed for you a treatment which includes the chemotherapy cisplatin and fluorouracil (5FU).

Day 1 Cisplatin via a drip over 7 hours, given with plenty of fluid.

Days 2 to 5 Fluorouracil (5FU) given via a portable infusion pump.

Day 21 Restart with next cycles (Day 1)

The treatment is repeated every 3 weeks, usually for 3 to 6 cycles.

To support your immune system, you may receive injections for 5 days of GCSF underneath your skin. We will give you more details about this drug in clinic.

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.

In order to have your treatment, you will require a 'line' to be inserted prior to your treatment. This will be discussed during your initial clinic visit.

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 to 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

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) (Warning!)

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 (Warning!)

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.

# Kidney damage (Warning!)

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 radioisotope department and is a series of blood tests. The GFR will be repeated before alternate cycles of 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 fluids (at least 8 cups per day) during your course of chemotherapy.

# Nausea and vomiting (sickness)

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.

# Diarrhoea (Warning!)

If this becomes a problem while you are having treatment, anti-diarrhoea tablets can be prescribed by your GP for a temporary period until this is resolved. If the problem persists contact The Christie Hotline on 0161 446 3658 for advice. If you develop severe diarrhoea, it is important to contact The Christie straightaway as this may be a sign of a serious infection. Don't delay!

# Constipation

You may become constipated during this treatment. Try to drink plenty of fluids and eat foods high in fibre. Tell your doctor who may prescribe a suitable laxative. Ask staff for a copy of The Christie booklet 'Eating - help yourself'

# • Loss of appetite

The chemotherapy may reduce your appetite. Ask staff for a copy of The Christie booklet 'Eating - help yourself' which has some useful ideas about diet when you are having treatment.

#### 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.

### Darkening of the veins

Fluorouracil can irritate the vein wall and can cause discolouration. You may get brown marks along the course of the vein where the drip was inserted, and your arm can also become itchy. This will usually fade over time. Please tell your hospital doctor at your next appointment if you have any problems.

# 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. You may benefit from additional support during your treatment. If necessary take time off work. Gentle exercise, such as walking can however be beneficial.

# Flu-like symptoms

Some chemotherapy may cause flu-like symptoms such as fever, aches and pains and shivering about 3 to 5 hours after your treatment. 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.

GCSF, a growth factor which stimulates the bone marrow to make white cells, may be used during chemotherapy treatment to help reduce the risk of infection.

# Uncommon side effects (less than 1 in 10)

# Tinnitus and high frequency hearing loss

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

# • Tingling and numbness in the fingers or toes (peripheral neuropathy)

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

# • Hair thinning

It is uncommon to lose hair with this treatment although it may thin a little. 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 **the-christie.informationcentre@nhs.net** 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 can support you with hair loss by helping you consider the practicalities as well as the emotional impact. You can call into Maggie's Monday to Friday, 9am-5pm to speak with their professional team. Maggie's provide expert care and support to everyone with cancer and those who love them. Contact Maggie's on **0161 641 4848** or drop in, their address is The Robert Parfett Building, 15 Kinnaird Road, Manchester, M20 4QL

# • Sensitivity to the sun

Some chemotherapy can make your skin more sensitive to the sun than usual. Sit in the shade, avoid too much sun and use a high factor sunblock cream.

#### Skin rash

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

### Sore hands and feet (Warning!)

If the skin on your hands and feet becomes sore, contact the hospital straightaway. Tablets and cream can be prescribed to help you. Try to keep your hands and feet cool and, if possible uncovered or wear loose-fitting cotton socks.

### Brittle/discoloured nails

Your nails may become a little discoloured or brittle while you are having treatment. Any changes in your nails will gradually improve after your treatment has finished.

### Sore eyes

You may get a **dry**, **gritty feeling** in your eyes following treatment. If this happens, using Hypromellose eye drops will help to ease the discomfort. If the problem persists, contact this hospital. Your eyes may also water. This will improve in time and needs no specific treatment.

### • 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.

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

### Allergic reaction

Ask the staff for help if you notice any of the following:

- some people have hot flushes when the drug is given
- fevers and chills; back pain, shortness of breath, headaches and swelling of the face may occur during the time the drug is being given. If this happens, please tell the staff straightaway. Your doctor may prescribe a drug that can help to reduce these side effects and, if necessary, we can give you this before your next treatment.

#### 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.

# Serious and potentially life threatening side effects

In a small proportion of patients, chemotherapy can result in very serious side effects which may rarely result in death. The team caring for you will discuss the risk of these side effects with you.

# • Testing for DPD deficiency

The body makes enzymes which break down chemotherapy drugs so that chemotherapy doesn't build up in the body and cause severe side-effects. A very small percentage of the population (approximately 1 in 20) either don't produce or produce less of an enzyme called DPD which would normally break down the chemotherapy drugs 5FU and capecitabine. This is called DPD deficiency. Reduced production of DPD is not an issue in day-to-day life, but it might mean that some patients experience severe and sometimes life-threatening side effects after 5FU or capecitabine chemotherapy is given. Patients with DPD deficiency are more likely to develop severe mouth ulcers and diarrhoea and very low bloods counts increasing vulnerability to life threatening infections.

In order to check that it is safe for you to have this treatment, your team will be arranging a one off blood test. This test checks for some of the commonest abnormalities which can cause DPD deficiency.

Your medical team will discuss the test results with you and can confirm whether you will be able to go ahead with your planned chemotherapy, or whether any changes need to be discussed.

Although DPD testing identifies many patients who are at risk of severe side-effects from 5FU and capecitabine, it does not identify all at risk patients. Severe and sometimes life-threatening side-effects can occur in patients who have had a normal test result. Therefore it is important that patients receiving chemotherapy monitor their symptoms carefully and contact The Christie Hotline if they become unwell.

### • Chest pain or stroke (Warning!)

A small number of patients receiving 5FU, UFT or capecitabine can experience chest pain (angina) or rarely have 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.

### 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.

# Sex, contraception and fertility

Protecting your partner and contraception: We recommend that you or your partner use a barrier form of contraception 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.

#### 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 2 vaccinations. However, if you're thinking of having any other vaccinations, do check with your Christie doctor first, because some vaccines should be avoided.

#### **COVID-19 vaccinations**

We advise that all patients receive a COVID-19 vaccination when this is offered. Your doctor will discuss with you the best time to have this.

#### 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 <b>0161 446 3658</b> (24 hours a day, 7 days a week
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, Salford or Macclesfield. 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

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The Christie Patient Information Service Tel: 0161 446 3000 www.christie.nhs.uk