

Daratumumab, Velcade and Dexamethasone

The possible benefits of treatment vary; for some people 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 general information on chemotherapy and side effects.

Your treatment

Your doctor has suggested a combination of tablets and subcutaneous injection (under the skin) treatment for your myeloma. This treatment consists of 3 drugs, which are daratumumab (Darzalex), bortezomib (Velcade) and dexamethasone.

Daratumumab is a new class of drug called a monoclonal antibody and is given subcutaneously (under the skin). Bortezomib is also given subcutaneously (injection under the skin) and dexamethasone is a tablet, these drugs are given together as they work in combination to treat your myeloma.

These drugs are given in cycles, each cycle lasting 21 days (see information sheet).

This is given until disease progression or side effects occur that prevent further treatment.

The medicines used in this treatment are:

Daratumumab: This medicine is given as a subcutaneous (under the skin) injection on our day unit. For the first dose you will need to remain in the department for 4 - 6 hours after the injection as there is a small risk of having a reaction.

Bortezomib: This is a quick injection under the skin is given on our day case unit or via our outreach service in your home. This will be given during the first 8 cycles of treatment only. It is important to drink plenty of fluids during treatment cycles (up to three litres a day) as bortezomib can affect kidney function.

Dexamethasone: steroid tablets are taken slightly different in different treatment cycles so please follow information sheet overleaf. Steroids should be taken with food. It is better to take them earlier in the day, for example, with breakfast, since they can keep you awake if taken late in the day.

Steroids should be taken with food. It is better to take them earlier in the day, for example, with breakfast, since they can keep you awake if taken late in the day.

IMPORTANT: Daratumumab can affect test results used to match your blood for blood transfusions. This effect can last for up to six months after your final infusion of daratumumab. You should have this test done before you start treatment with daratumumab and you should inform any healthcare team who treats you that you are being treated with daratumumab.



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 passing urine, cough or breathlessness. We recommend that you use a thermometer so you can check your temperature. You can buy one from your local chemist.

If your temperature is 37.5°C or above, or below 36°C or you have symptoms of an infection, 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. We are all different, so we may get different side effects with varying severity. 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.

Injection site reactions

Skin reactions at or near the injection site (local), including injection site reactions, can happen with daratumumab solution for subcutaneous injection.

These reactions are common (may affect up to 1 in 10 people) and symptoms may include:

- redness of the skin
- itching
- swelling

Very common side effects (more than 1 in 10)

Low white blood cell count

There is a risk of infection and shingles.

Bruising or bleeding

This treatment can reduce the production of platelets which help the blood to clot. Tell your doctor if you have unexplained bruising or bleeding, such as nosebleeds, bloodspots or rashes on the skin and bleeding gums. You may need a platelet infusion.

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.

Gastrointestinal disturbance

This treatment can cause constipation, diarrhoea, nausea, an increase or decrease in weight. It is important to drink plenty of fluid and maintain a balanced diet. Please report any of these symptoms to your nurse or doctor.

Peripheral neuropathy (tingling and numbness in toes or fingers)

Bortezomib can cause nerve damage – this causes numbness or pins and needles in your fingers or toes or muscle cramps and weakness of the legs. *It is important to tell us if this happens* as the dose of bortezomib may have to be reduced or temporarily stopped. The peripheral neuropathy is usually temporary, but can last for some time.

Steroid side effects

The **dexamethasone** tablets should be taken with food as they may cause indigestion. The tablets may also increase your appetite. It is better to take them earlier in the day, since they can make you feel more alert and prevent sleep.

Dexamethasone tablets can alter your mood causing you to feel low, irritable or agitated. Please tell your doctor or nurse if this is a problem.

Blood sugar

Dexamethasone can cause your blood sugars to rise. If you are diabetic then you may need to increase the dose of diabetic medication you take. You should discuss this with your doctor before starting the treatment. Dexamethasone can also induce diabetes in people not known to have this disease. This is normally reversible although you may need to take some diabetic medication while you are having treatment.

Common (may affect up to 1 in 10 people):

Cardiac disorders

Daratumumab can also cause heart problems or worsen pre-existing heart conditions and you will have a comprehensive medical assessment, prior to starting treatment with daratumumab. You will be monitored carefully during treatment, which will include blood pressure monitoring and fluid management.

Aches and pains

Daratumumab may cause muscular aches and pains. A simple painkiller such as paracetamol may help with this. If you find that symptoms are persistent or unmanageable then speak to your doctor.

Uncommon side effects (less than 1 in 10)

Hepatitis

You may develop inflammation of the liver.

The following symptoms require medical attention, but are not an emergency. Contact your health care provider within 24 hours of noticing any of the following:

- Nausea (interferes with ability to eat and unrelieved with prescribed medication).
- Vomiting (vomiting more than 4-5 times in a 24 hour period).
- Diarrhoea (4-6 episodes in a 24-hour period).
- Constipation unrelieved by laxative use.
- Extreme fatigue (unable to carry on self-care activities).
- Mouth sores (painful redness, swelling and ulcers).
- Yellowing of the skin or eyes.
- Swelling of the feet or ankles.
- Sudden weight gain.
- Signs of infection such as redness or swelling, pain on swallowing, coughing up mucus, or painful urination.
- Unable to eat or drink for 24 hours or have signs of dehydration: tiredness, thirst, dry mouth, dark and decreased amount of urine, or dizziness.

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.

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.

Hepatitis B

Tell your doctor if you have ever had or might now have a hepatitis B infection. This is because daratumumab could cause hepatitis B virus to become active again. Your doctor will check you for signs of this infection before, during and for some time after treatment with daratumumab. Tell your doctor right away if you get worsening tiredness, or yellowing of your skin or white part of your eyes.

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 and for at least 3 months post the last dose of daratumumab. 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.

Contacts

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

Lisa Jeffrey, Emma Whitham and Decima Govett, **0161 918 7962**
Haematology Clinical Nurse Specialists

Haematology and Transplant day unit **0161 446 3924**

General enquiries **0161 446 3000**

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

Your consultant is:	
Your hospital number is:	
Your key worker is:	

DVD Drug Charts Cycle one

Day:	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21
Date: Cycle 1																					
Daratumumab Dose:																					
Bortezomib Dose:																					
Dexamethasone Dose:	Inj																				
Other drugs:																					
Montelukast (cycle one only)	✓							✓							✓						
Acidovir																					
Co-trimoxazole <i>Monday and Thursdays only</i>																					
Metoclopramide <i>If required</i>																					
Lansoprazole																					

The bortezomib dose may be given weekly to reduce side-effects

Cycle 2 and 3

Day:	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	
Date:																						
Cycle 2 and 3																						
Daratumumab Dose:																						
Bortezomib Dose:																						
Dexamethasone Dose:																						
Other drugs:																						
Aciclovir																						
Co-trimoxazole <i>Monday and Thursdays only</i>																						
Metoclopramide <i>If required</i>																						
Lansoprazole																						

Cycle 4 to 8

Day:	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21
Date:	Cycle 4 to 8																				
Daratumumab Dose:	■																				
Bortezomib Dose:	■			■				■			■										
Dexamethasone Dose:	■	■		■	■			■	■		■	■									
Other drugs:																					
Aciclovir																					
Co-trimoxazole <i>Monday and Thursdays only</i>																					
Metoclopramide <i>If required</i>																					
Lansoprazole																					

Cycle 9 onwards

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28
Day:																												
Date:																												
Daratumumab Dose:																												
Dexamethasone Dose:																												
Other drugs:																												
Aciclovir																												
Co-trimoxazole <i>Monday and Thursdays only</i>																												
Metoclopramide <i>If required</i>																												
Lansoprazole																												

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

