

Docetaxel (Taxotere) & Gemcitabine (Sarcoma)

The possible benefit of this treatment is that it may control the cancer and its symptoms. Chemotherapy is the most commonly prescribed anti-cancer treatment but other types of treatment are also used. 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 or nurse clinician has prescribed for you a treatment which includes the chemotherapy docetaxel (also known as Taxotere) and Gemcitabine. The treatment consists of the following:

- Day 1 Gemcitabine by drip over 90 minutes.
- Day 8 Gemcitabine over 90 minutes and Docetaxel over 60 minutes.
- Day 21 Restart with the next cycle (Day 1)

Treatment is given every 3 weeks for cycles.

You will have routine blood tests before the start of each cycle of treatment.

Remember to take your dexamethasone tablets twice daily for 3 days (or according to your doctor's instruction).

Start taking the dexamethasone on day 7 (24 hours prior before your docetaxel chemotherapy). This is important – dexamethasone helps to prevent allergic reactions to the chemotherapy. If you forget, you must tell your chemotherapy nurse before you have treatment.

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.

Warning!

Some people may have an **immediate allergic reaction** to the chemotherapy. You may feel short of breath, develop a rash on your body and have red flushes. This is temporary, but call your nurse immediately. The nurse can give you an injection to stop this.

Grapefruit: Please do not eat grapefruit or drink grapefruit juice while you are having treatment as this can interact with the docetaxel.



Increased risk of serious infection (Warning!)

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.

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)

• Steroids (Dexamethasone)

Can cause indigestion but this can be reduced by taking dexamethasone with food. They may also increase your appetite. It is better to take them earlier in the day, for example with breakfast and lunch, since they can make you feel more alert and prevent sleep. In some people dexamethasone tablets can **alter your mood** causing you to feel low, irritable or agitated. Please tell the doctor at your next clinic if this is a problem.

• 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.

• 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. You may find the booklet 'Exercise during and after treatment' helpful. This can be obtained from the cancer information centre.

• Hair loss

Hair loss is usually total. The hair falls out gradually 10 to 14 days following your first course of treatment. The time scale varies from person to person. 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 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.

- **Nausea and vomiting (sickness)**

The severity of this varies from person to person. Anti-sickness medication may be given along with your chemotherapy to prevent this. You may 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.

- **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 or nurse about this, so that appropriate painkillers can be prescribed.

- **Diarrhoea (Warning!)**

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 this problem persists contact The Christie. You may have mild diarrhoea and anti-diarrhoea tablets may help. **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!**

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

This is only usually mild and temporary but sometimes lasts for some time or become permanent. Please report these symptoms to your doctor on your next hospital visit.

- **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.

- **Constipation**

Try to drink plenty of fluids. Report this to your hospital doctor or nurse who can advise you regarding diet and who may prescribe a suitable laxative. Ask the staff for a copy of 'Eating - help yourself' which has useful ideas about diet when you are having treatment.

Uncommon side effects (less than 1 in 10)

- **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.

- **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 straight away.

- **Fluid retention**

The chemotherapy can cause fluid retention, so that your hands and feet become swollen. Keeping your feet and legs raised may help. This will be temporary but should you experience this contact your hospital doctor or nurse.

- **Skin rash**

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

- **Sensitivity to the sun**

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

- **Blood sugar**

Dexamethasone can cause your blood sugar to rise. If you are diabetic then you may need to increase the dose of any diabetic medication you take (insulin or tablets). You should discuss this with your doctor before starting the chemotherapy. 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 chemotherapy.

- **Flu-like symptoms and headaches**

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.

Rare side effects (less than 1 in 100)

- **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.

- **Changes in nails**

The nails may become brittle and their texture or colour may change. This change grows out over several months once the treatment has finished. Pain in the nail bed (at the base of the nail) may occur, but this is rare.

- **PPE (palmar-plantar erythema)**

The skin on your hands and feet may become very dry, red and sore with some cracking. Tell your doctor as creams and tablets can be prescribed which can help. Your chemotherapy dose may need to change. Try to keep your hands and feet cool and if possible, uncovered.

- **Hyperpigmentation**

Your skin may appear darker in colour or lightly tanned, especially around the joints. This is known as hyperpigmentation. Asian and African-Caribbean people may develop noticeable light patches on their skin. The skin will return to normal when treatment is finished.

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.

Loss of periods: Due to the effects of chemotherapy on the ovaries you may find that your periods become irregular or may eventually stop. In younger women this may be temporary, but if you are closer to your menopause it may be permanent. This will result in hot flushes, sweats and vaginal dryness.

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:

Administrative enquiries - **0161 918 7606 / 7653**

Chemotherapy nurse - **0161 918 7171**

Clinical trials unit - **0161 918 7663**

Sarcoma clinical nurse specialist - **0161 446 3094**

Sarcoma research office - **0161 918 7355 / 7098**

Palatine treatment unit - **0161 446 3960**

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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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 **patient.information@christie.nhs.uk**

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