

Cetuximab (colorectal)

Cetuximab is a type of anti-cancer treatment called targeted therapy. The possible benefits of this treatment vary; for some people this treatment may reduce the risk of the cancer coming back, for others it may control the cancer and its symptoms. Your treating team will be happy to answer any questions you have about your treatment.

Your treatment

Your treating team has prescribed for you a treatment which includes the monoclonal antibody Cetuximab. This treatment can be given in combination with chemotherapy.

Day 1 Cetuximab by drip over 2 hours for the first 2 cycles.
Subsequent doses may be given over 1 hour.
Treatment is most commonly repeated every 2 weeks.

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.

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.

Flu vaccinations

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

It's safe to have a flu jab, but depending on the sort of anti-cancer treatment you have had, it may not give quite as much protection against infection as usual. Some patients may need 2 vaccinations. However, if you are 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

Possible side effects

This treatment can cause many different side effects. Some are more likely to occur than others. 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 treating team about any side effects so they can be monitored and, where possible, treated.

Common side effects (more than 1 in 10)

• Skin reaction

The most common reaction is an acne-like rash that can affect the face, back, chest and arms. The rash often starts within 3 weeks of the first dose of treatment. The acne-like rash often improves with antibiotics and topical creams but can remain an issue as long as cetuximab treatment continues. Dry skin and nail changes can become more common in patients who have remained on treatment for several months. Using a sunscreen with high UV protection can also help. Sometimes cetuximab may not be given for 1 to 2 weeks to allow the skin to improve. Patients who continue on cetuximab for long periods of time sometimes complain of itching, dry skin.

• Eye problems

You may experience inflammation of the eyelids, your eyelashes may grow longer and you may produce excessive tears or have red, itchy and dry eyes. You may also get conjunctivitis. If you experience acute or worsening symptoms or light sensitivity, blurred vision, eye pain and/or red eyes, you should inform your clinician immediately and this may require an ophthalmology referral.

• Nail problems/ infections

Pain and redness at the edges of finger or toenails can be a sign of infection and will require treatment with antibiotics.

• Flu like symptoms

Mild symptoms of fevers, chills, and nausea can occur at the time of the infusion and normally quickly resolve. Fatigue or tiredness is also quite common.

• Diarrhoea

Diarrhoea is a common side effect of your treatment. If you have watery diarrhoea, you should take the anti-diarrhoea treatment called loperamide immediately. Follow the instructions given with your medication and as follows. Instructions: Take 2 loperamide capsules/tablets as soon as the first liquid stool occurs. Then take 1 capsule/tablet with each loose stool thereafter (maximum loperamide in a day is 8 capsules/tablets, however some patients with a stoma may require more than this to control output). If you have a stoma or notice loperamide capsules in your stoma output, you should ask for loperamide tablets rather than capsules.

If the diarrhoea continues for more than 24 hours despite taking the loperamide, please contact The Christie Hotline on **0161 446 3658** for advice.

• Low magnesium

Magnesium is a blood salt that can become low after several weeks of treatment with cetuximab. The most common symptoms this can cause are weakness and muscle cramps. Rarely, it can also cause confusion or heart problems. The magnesium levels in your blood will be closely monitored during treatment and eating foods high in magnesium such as dark leafy greens, nuts, seeds, fish, beans, whole grains, avocados, yoghurt, bananas, dried fruit and dark chocolate can help maintain your magnesium levels. Magnesium supplements can be given if the level falls below normal and some patients may require a regular drip of magnesium to maintain levels.

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

Uncommon side effects (less than 1 in 10)

- **Allergic reaction**

Occasionally allergic reactions can occur whilst you are receiving the cetuximab drip in hospital. This can result in symptoms of a rash, dizziness, wheeziness, shortness of breath, and loss of consciousness. Before receiving cetuximab all patients are given treatment to reduce the risk of a reaction occurring. If you develop an allergic reaction the drip will be stopped and further treatment will be given to help the reaction settle.

Serious infusion reactions occurred in approximately 3 in 100 patients in clinical trials, with a fatal outcome reported in less than 1 in 1,000 patients.

- **Lung toxicity**

Interstitial lung disease (ILD) is excessive, unnatural inflammation of the lungs and is a rare toxicity occurring in less than 1 in 200 patients. You may experience a troublesome, persistent cough and severe breathing difficulties which can rarely be fatal. In patients who already have interstitial pneumonitis or pulmonary fibrosis, the benefits of therapy versus the risk of lung complications will be specifically discussed with your 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.

- **Blood clots (Warning!)**

People with cancer are at a higher risk of developing bloods clots. The medical name for this is a thromboembolism or a deep vein thrombosis (DVT). The most common place to develop a clot is in the leg.

You must contact The Christie Hotline on **0161 446 3658** immediately if you experience any of the following:

- pain, redness and swelling of your arm(s) or leg(s). The area may feel warm to touch
- breathlessness, pain in your upper back, light headedness, coughing up blood

For any chest pain, please call **999** immediately.

You can help to prevent a clot by taking regular short walks to keep the blood moving, do simple exercises such as bending and straightening your toes every hour if you are unable to move around much and drink plenty of fluids. Most clots can be treated successfully using drugs to help thin the blood (anticoagulants).

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 clinician 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 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