

## Carboplatin and capecitabine

The possible benefits of treatment vary; for some people this chemotherapy include a reduction in the amount of the cancer and a reduction in the symptoms it causes. 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 or nurse clinician has prescribed for you a treatment with carboplatin and capecitabine. The treatment consists of the following:

**Day 1** Carboplatin by drip over 1 hour.

**Days 1 to 14** Capecitabine tablets by mouth.  
Take the tablets twice a day with water, no longer than half an hour after food.

**Days 15 to 20** No chemotherapy

**Day 21** Restart with the next cycle.

This treatment involves day case treatment in hospital on Day 1 of each cycle.

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 any 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.



## **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.

## **Extravasation (Warning!)**

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.

## **Other possible side effects**

Chemotherapy can cause many different side effects. Some are more likely to occur than others. Everybody 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)**

### **• 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 may also be given anti-sickness tablets to take at home. **If you continue to feel or be sick, contact The Christie Hotline for advice.**

### **• Kidney damage (Warning!)**

Before you start the treatment you will need to have a test called a GFR. This is performed in the nuclear medicine department and consists of an injection followed by a series of blood tests. The GFR test result is used to calculate the dose of carboplatin and to make sure your kidneys are working well enough for you to have 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 1.5 litres per day) during your course of chemotherapy.

**Please do not take ibuprofen or any other anti-inflammatory drugs while you are on this chemotherapy.**

Please read the information about testing for DYP deficiency on page 4.

### **• Diarrhoea (Warning!)**

This can be a side effect of capecitabine. It may also be a sign of serious infection. If the diarrhoea is mild, you can take a tablet (loperamide) from your Pharmacy or GP to stop it. **If the diarrhoea is severe or wakes you during the night, you must contact The Christie Hotline straightaway on 0161 446 3658. Diarrhoea can lead to life-threatening dehydration.**

### **• Constipation**

You may become constipated during this treatment. Try to drink plenty of fluids and eat foods high in fibre. Ask the staff for a copy of 'Eating - help yourself' which has useful ideas about diet when you are having treatment. You will be prescribed some laxatives but if these are not working, please tell us.

### **• Sore mouth (Warning!)**

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. You should keep your mouth very clean using a mouthwash of sodium bicarbonate and saltwater (sodium chloride). You can take soluble paracetamol to help with the soreness. Ask your doctor or nurse for advice. The chemotherapy booklet also has general mouthcare advice. **If your sore mouth is preventing you from eating and drinking, please contact The Christie Hotline for advice.**

- **Fatigue**

It is common to become tired and lacking in energy with this chemotherapy. You may feel you need to rest for a while during the day. You may need help with the household chores. It is a good idea to do some gentle exercise; even a walk round the block can help.

- **Metallic taste in the mouth**

You may have a strange or metallic taste in your mouth during treatment. Sucking a mint or other strongly flavoured sweet may help.

## **Uncommon side effects (less than 1 in 10)**

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

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

- **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.

- **Sore hands and feet (palmar-plantar erythema)**

The skin on your hands and feet may become very dry, red and sore with some cracking. Cream and tablets can be given which can help. Use a moisturiser on your hands and feet. Your chemotherapy dose may need to change. Try to keep your hands and feet cool and if possible, uncovered. If the skin become very sore or starts to peel, please ring The Christie Hotline.

- **Nail changes**

Your nails may become brittle and ridged. The skin the sides of your nails may become red and sore.

- **Pain in the joints and back**

You can take painkillers such as paracetamol for this. Let your doctor or nurse know about the pain when you next visit the hospital.

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

- **Allergic reaction**

This is rare but usually occurs during the infusion (drip) of carboplatin. If you feel short of breath, dizzy or itchy or you notice a rash, tell the nurse immediately

- **Chest pain or stroke (Warning!)**

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

- **Severe skin reaction (Warning!)**

Very rarely you may develop a severe skin reaction. If you experience tender red skin patches which subsequently blister please seek urgent medical advice. The skin changes may be preceded by fever, chest symptoms and photophobia (a need to squint or close your eyes, which is worse in bright light). These symptoms may be caused by conditions called toxic epidermal necrolysis (TEN) and Steven Johnson syndrome (SJS).

- **Hair thinning**

Some hair loss may occur during treatment, including body and facial hair. 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 may 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 8439** 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. Maggie's provides expert care and support to everyone with cancer and those who love them. You can call into Maggie's Monday to Friday, 9am-5pm to speak with their professional team, their address is Maggie's Manchester at The Robert Parfett Building, 15 Kinnaird Road, Manchester, M20 4QL or you can call them on **0161 641 4848** or email **manchester@maggies.org**.

- **Bruising or bleeding (Warning!)**

This treatment can reduce the production of platelets which helps the blood clot. Tell your doctor 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.

You will have a routine blood test before each treatment to monitor the effects of the chemotherapy.

- **Watery eyes**

Your eyes may also water often. This will improve in time and needs no specific treatment, but if you have ongoing symptoms, please discuss this with your doctor or nurse.

## **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.

- **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 blood 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.

## **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 this with you the best time to have this.

## **Contacts**

If you have any general questions or concerns about your treatment, please contact us on the numbers below.

Chemotherapy scheduler: **0161 918 2026**

Your consultant is: .....Secretary **0161 446** .....

Your hospital number is: .....

Your key worker is:

Kathleen Mais - **07539 527907** (mobile) or **0161 446 3428**

Chemotherapy Hotline **0161 446 3658**

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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