Raltitrexed (Tomudex)

The possible benefits of this 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 or nurse clinician has prescribed for you a course treatment with Raltitrexed.

Raltitrexed is given via a drip over 15 minutes.

It is given every 3 or 4 weeks for ............... cycles.

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.

Situations where Raltitrexed is used
Raltitrexed is an option for patients when the alternative chemotherapy drugs 5FU or Capecitabine cannot be used, or their use is felt to have a high-risk of complications.

There are three patient groups where Raltitrexed is used:
1. Patients with mutations in the DPYD gene (see below) which prevent the use of 5FU or Capecitabine.
2. Patients who have had heart problems (e.g. angina or heart attack) after receiving 5FU or Capecitabine.
3. Patients who have a significant past history of ischaemic heart disease in whom the use of 5FU or Capecitabine may have a high-risk of exacerbating on-going angina or causing a heart attack. Although the risk of exacerbating underlying heart problems is low with Raltitrexed any patient experiencing significant chest pain whilst on this treatment should go immediately to your nearest accident and emergency department.

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.

After Cycle 2 of treatment, if clinically possible you will have your treatment at a location closer to home. The Christie is committed to providing treatment closer to home as part of the Outreach and Christie at Home service.

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. 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)

• 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
Diarrhoea is a common side effect of your treatment. If you have watery diarrhoea you should immediately take the anti-diarrhoea treatment that the doctor has prescribed for you. This is the loperamide and may be dispensed by The Christie pharmacy, prescribed by your GP or bought from your local community pharmacy. Follow these instructions EXACTLY:

Take 2 loperamide capsules/tablets as soon as the first liquid stool occurs. Then take one capsule/tablet with each liquid loose stool. (The maximum dose of loperamide in a day is 8 capsules/tablets).

If you have an increase of more than 4 bowel movements each day compared to pre-treatment or any diarrhoea at night, please ring The Christie Hotline for advice.

• 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.
Uncommon side effects (less than 1 in 10)

• 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. For 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.

• 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.

• Bruising or bleeding
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 function
Your kidneys play an important role in dealing with many drugs. It is important to monitor how well your kidneys are working while you are having treatment. We do this by a blood test. If there are concerns about your kidney function a more accurate assessment can be made by an X-ray test. It is important to drink plenty of fluids (at least 8 cups) the day before and for a few days after chemotherapy.

• Liver function
Raltitrexed can also cause changes in your liver function. This will go back to normal once your treatment has finished. You will have regular blood tests to monitor this.

• 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.

If you would like an appointment with the wig service, this can be arranged for you by visiting the Cancer information centre or call 0161 446 8100. Ask the staff for a copy of ‘The wig fitting service at The Christie.’ The Maggie’s centre runs a head care workshop. Contact Maggie’s on 0161 641 4848 or email manchester@maggiescentres.org to arrange an appointment.

• 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.

• Herbal medicine
Some herbal medicine including St John’s Wort can affect the chemotherapy. You should let your doctor or nurse know if you are taking any herbal medication, complementary or alternative medicines, including vitamins, minerals and medicines purchased over-the-counter.
• **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.

**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.

• **Increased risk of serious infection**
As discussed earlier chemotherapy results in an increased risk of severe infections which can be life threatening.

• **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 (around 2 to 3 litres per day). Symptoms of a blood clot include breathlessness; chest pain; fainting; coughing up blood or pain; redness; swelling or warmth in an arm or leg. If you develop any of these symptoms you should ring 999 or go immediately to your nearest accident and emergency department.

**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.

**For female patients only**

**Menopausal symptoms**
When the ovaries stop working due to chemotherapy or during a natural menopause most women experience symptoms such as hot flushes, sweats (night and day) and vaginal dryness. These hormonal changes can make the vagina feel as though it has shrunk and become less easy to stretch. This is called vaginal atrophy and can result in discomfort, pain on sexual intercourse, itching and recurrent urine infections. If your ovaries don’t start to work again the vaginal symptoms can be permanent, although the flushes and sweats tend to reduce and stop over a small number of years. Some women who have already gone through menopause may notice their symptoms worsening for a time after chemotherapy.

The vaginal symptoms can start early and the longer they are left the harder they can be to treat. Please contact your specialist nurse either in clinic or by phone when the symptoms first develop if you would like help. Symptoms can be managed in several ways including gels, essential oil pessaries and sometimes local oestrogen replacement. You may also find it helpful to request the booklet ‘Menopausal symptoms and breast cancer’ by Breast Cancer Now (either from your breast care nurse, the cancer information centre at The Christie or online).
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)

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

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