

Pixantrone

The possible benefits of treatment vary; for some people this 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 treatment which includes the chemotherapy pixantrone.

The treatment is given as an infusion (drip) over 60 minutes. It is given on day 1, day 8 and day 15 of a 28 day cycle.

The treatment is given for up to 6 cycles.

You will have a routine blood test and medical review before the start of each cycle of treatment. This is so your team can monitor and manage any side effects as well as assess your response to 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.

• If you are taking any other medicines: It is important to tell the doctor if you are taking medicine for any other condition. Some medicines can react with your treatment. Always tell your doctor at every visit about any other medicines or tablets you are taking.

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.

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.



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Tumour lysis syndrome

This treatment may cause the rapid breakdown of lymphoma cells, which may lead to abnormalities in the blood. This problem is more likely if you have a lot of disease or if your kidneys do not work as well as they should do. Your doctor will tell you if you are at risk. You may be given a kidney-protective medicine called allopurinol for the first cycle of treatment, and your doctor may do additional blood tests to monitor this side effect. We sometimes admit patients for the first treatment to give intravenous fluids and kidney-protective medication and twice daily monitoring of blood tests for 48 hours.

Common side effects (more than 1 in 10)

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 pharmacy.

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)

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, or bleeding gums. You may need a platelet transfusion.

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 The Christie, because your anti-sickness medication may need to be changed or increased.

Diarrhoea

If you experience diarrhoea while you are having treatment, anti-diarrhoea medication can be bought from a pharmacy or prescribed by your GP for a temporary period until this is resolved. If the problem persists contact The Christie. Ask the staff for a copy of 'Eating: help yourself' which has some useful ideas about diet when you are having treatment.

Constipation

You may become constipated as a result of this treatment and/or the anti-sickness medication. Try to drink plenty of fluids and eat foods high in fibre. Report this to your hospital doctor 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.

Sore mouth and altered taste sensation

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.

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Occasionally during treatment you may have a strange taste (metallic or bitter). A strongly flavoured sweet or mint will help to disguise this. Normal taste will usually return after the treatment finishes.

Hair loss

Hair thinning or complete hair loss may occur during treatment. 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'.

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 to arrange an appointment.

Loss of appetite

If you experience a loss of appetite, please be sure to tell your doctor or nurse at your next hospital visit.

Bone pain

Bone pain can be a temporary side effect while having this treatment. It is important to tell your doctor or nurse about this, so that appropriate painkillers can be prescribed.

Discolouration of urine

Pixantrone can make your urine go bluish in colour. This is temporary and should only last for the first 24 hours following treatment.

Discolouration of eyes

Pixantrone may discolour the whites of your eyes to have a slight blue tint. This is temporary and should resolve after treatment finishes.

Conjunctivitis

You may develop sore or reddened eyes and/or discharge in the corners of your eyes. Contact your doctor if this occurs.

Skin and nails

Pixantrone can cause your skin and nails to discolour. This is temporary for a few days to a few weeks. During your treatment your skin can be more sensitive to the sun than usual. Sit in the shade, avoid too much sun, wear protective clothing and use a high factor sunblock cream. Asian and African-Caribbean people may develop noticeable light patches on their skin.

Lethargy and weakness

Chemotherapy often makes you feel tired and lacking in energy. It can be frustrating when you feel unable to cope with routine tasks. If you do feel fired, take rest and get help with household chores. If necessary, take time off work. Gentle exercise such as walking can be beneficial. You may experience generalised muscle weakness.

Heart damage (Warning!)

There is a possibility that your heart pumping function could decrease or your could develop a condition called congestive heart failure during or after treatment. This risk is higher if you already have heart problems. Your doctor may check your heart function before you have this treatment, and will discuss the risk with you before you consent to the treatment.

Rare side effects (less than 1 in 100)

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 straightaway.

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.

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 an increased chance 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:

Haematology day unit - **0161 446 3924** Lymphoma clinical nurse specialists - **0161 446 8573**

Lymphoma secretaries - 0161 446 3753 - Professor Radford/Dr Linton 0161 446 8574 - Professor Illidge 0161 446 3956 - Dr Smith 0161 446 3332 - Professor Cowan 0161 446 3302 - Dr Harris/Dr Chan
0161 446 3869 - Dr Bloor
Palatine treatment ward - 0161 446 3960/3961 General enquiries - 0161 446 3000
Your consultant is:

Your hospital number is:

Your key worker is:

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Notes:



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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

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