

## For the Patient: DCAP

Other names: BRAVDCAP

**D** Docetaxel  
**CAP** Capecitabine

### Uses:

- BRAVDCAP is a combined intravenous and oral chemotherapy drug treatment plan, given as therapy for metastatic breast cancer, in the hope of destroying breast cancer cells that have spread to other parts of your body. This treatment may improve your overall survival and help reduce your symptoms.

### Treatment Plan:

- Your treatment plan consists of up to 6 chemotherapy cycles (about 5 months). A cycle length is 3 weeks. Docetaxel will be given intravenously at every visit, and a new prescription for Capecitabine will be written. Capecitabine will be taken as twice per day pills for the first 14 days of each 3 week cycle. For each cycle, you will need to have a blood test and see your oncologist before the treatment. The dose and timing of your chemotherapy may be changed based on your blood counts and/or other side effects.
- Each intravenous treatment will take about an hour. You will be asked to take Dexamethasone 8 mg (usually 2 x 4mg pills), twice daily for three days, starting one day prior to each dose of Docetaxel. This medication helps to prevent allergy to Docetaxel and also helps to prevent some of the side effects that might occur after using Docetaxel, such as edema, or limb swelling.

### Instructions:

- If you need an anti-nausea drug, bring your pills with you to take before each treatment. You may also need to take your anti-nausea pills at home after therapy. Nausea, however, is not a frequent problem with this Docetaxel.
- Drink reasonable amounts of fluids during each day of the chemotherapy cycle (6-8 cups a day). Notify your cancer clinic promptly if you are unable to keep fluids down.
- It is important to take **Capecitabine** exactly as directed by your doctor. You may be given tablets of more than one strength to make the right dose. Make sure you understand the directions. Capecitabine is usually taken twice daily, about 12 hours apart with equal numbers of tablets taken at each dose. Capecitabine tablets should be taken within 30 minutes following the end of a meal (breakfast and dinner) with a glass of water.
- If you **vomit** after taking Capecitabine, do not take a second dose. Call your doctor or cancer clinic nurse during office hours for advice. If you **miss a dose** of Capecitabine, take it as soon as you can if it is within 6 hours of the missed dose. If it is over 6 hours since the missed dose, skip the missed dose and go back to the usual dosing time. Call your doctor or nurse during office hours to ask about making up the missed dose.
- Sometimes Capecitabine treatment has to be **stopped for a short time** because of side effects. When you **restart** Capecitabine treatment, do not make up for the missed doses; instead take as directed by your cancer doctor and finish the treatment on the same day as originally planned. For example, if you stop on day 3 of your 14-day treatment course and then restart, you would still take the last dose on day 14. You may be told to take a different

dose and you may have extra tablets left over. Return the extra tablets to the clinic at your next visit. Taking a lower dose does not affect the usefulness of Capecitabine.

- Store Capecitabine tablets out of the reach of children, at room temperature, away from heat, light and moisture.
- Check with your doctor or pharmacist before you start taking any new drugs. Other drugs such as Phenytoin (DILANTIN®), Warfarin (COUMADIN®), and Digoxin (LANOXIN®) may interact with BRAVDCAP.
- You may drink small amounts of alcohol, as it will not affect the safety or usefulness of your treatment.
- Tell other doctors or dentists that you are being treated with BRAVDCAP before you receive any treatment from them.
- If you are still having menstrual periods, BRAVDCAP may cause your ovaries to stop working, resulting in menopausal symptoms (such as hot flashes) and infertility. Your periods may stop. **This may be permanent**, especially if you are 40 years of age or older. Even if you have stopped having periods after treatment, if you were fertile prior to chemotherapy, you may be able to conceive a pregnancy. Use birth control (but **not** birth control pills) if you could become pregnant, even if you have stopped menstruating because of chemotherapy. Do not breast feed during treatment. Talk to your doctor if you have questions about fertility and birth control after treatment.

### **Serious Risks of Treatment:**

**Unexpected and unlikely side effects can occur with any drug treatment. The ones listed below are particularly relevant to your treatment plan:**

#### **During treatment:**

- **Infection:** The number of white blood cells that help fight infections will be lowered by the chemotherapy drugs, usually starting after about day 7 of each cycle. Your blood count is expected to return to normal by day 1 of the next cycle, and will be normal after the 5 months of chemotherapy drugs. If your white blood cell count becomes very low you could get a serious infection. **If you have a fever over 38°C or 100°F, call your cancer doctor immediately (24 hours a day) or go immediately to your nearest Hospital Emergency and tell the doctor you are on chemotherapy.**
- **Increased risk of bleeding:** The number of platelets (special blood cells that help your blood to clot normally after injury) may be lowered by the treatment. They are expected to return to normal by day 1 of next cycle. When the platelet count is low you may be more likely to bruise or bleed. Notify your cancer doctor promptly if you develop large or numerous bruises, or unusual bleeding (eg. nosebleed that won't stop, blood in stool, urine, or sputum). Try to avoid using ASA or ibuprofen, if other pain medications could be used, especially if you are not drinking well or are having a lot of diarrhea. Talk to your doctor if you feel you need to use one of these medications while on chemotherapy. For patients receiving Warfarin, a modification of the dose may be required based on blood test results (increased INR due to possible interaction with chemotherapy).
- **Tissue or vein injury:** Docetaxel can cause tissue injury if it leaks out of the vein while being given. Report any sensation of burning or pain to your nurse immediately. Chemotherapy may cause some inflammation and/or scarring in the veins, which may make it difficult to start an IV. Your nurse will help your doctor assess whether a special intravenous device (PICC line or portacath) needs to be considered for your therapy. Pain or tenderness may occur where the needle was placed in your vein. If so, apply cool compresses or soak in cool water for 15-20 minutes several times a day.

- **Heart problems:** In up to 3% of patients, serious heart problems can occur within a few days of starting Capecitabine. These can rarely be fatal. Problems such as chest pain, heart attack, abnormal heart rhythm, or heart failure can occur. Having a history of heart problems with 5-FU, a related chemotherapy drug, is a risk factor, as is having a history of prior angina (heart pain) or heart attack. Tell your doctor promptly if you experience feelings of heavy pressure or pain in the chest, trouble breathing, significant worsening leg swelling, or marked lightheadedness, within the days after starting Capecitabine. If your symptoms are severe, you may need to call for emergency help.

**During or after treatment:**

- **Neuropathy:** Docetaxel can cause you to develop damage to the peripheral nerve endings (the nerves to the hands and feet, and rarely, the face). This can result in feelings of numbness and tingling, or sometimes painful burning sensations. You will need to be careful when handling things that are sharp, hot, or very cold. The majority of the time, these feelings develop after a number of treatments, are not severe, and will resolve fully over a period of months once treatment stops. Infrequently (<5%), these feelings might occur early, might be severe, or might not entirely resolve.

**Common chemotherapy side effects and management:**

SIDE EFFECT	MANAGEMENT
<p><b><i>Nausea and vomiting</i></b> can occasionally occur with Docetaxel and you may need to take anti-nausea drugs at the time of the injections and on days 2 and 3 while at home. Nausea, usually mild and intermittent, can also be caused by Capecitabine.</p>	<p>You will be given a prescription for anti-nausea drugs to take before your IV treatment and afterwards at home, if needed. If necessary, oral medications will also be prescribed for you to use as needed during your pill treatment with Capecitabine.</p> <ul style="list-style-type: none"> <li>• It is easier to prevent nausea than treat it once it has occurred, so follow directions closely.</li> <li>• Refer to pamphlets on how to deal with nausea and vomiting given to you by your nurse at your centre.</li> </ul>
<p><b>Allergic reactions</b> may occur during or after the administration of Docetaxel. Signs of an allergic reaction are flushing, rash, itching, dizziness, swelling or breathing problems, or sudden chest or back pain.</p>	<ul style="list-style-type: none"> <li>• Dexamethasone is used to help prevent allergic reactions. Doses of anti-allergic medications may be given if you have an allergic reaction despite this.</li> <li>• Your nurse will check your heart rate (pulse) and blood pressure if needed.</li> <li>• Tell your nurse or doctor <b><i>immediately</i></b> if you have any sign of an allergic reaction</li> </ul>

SIDE EFFECT	MANAGEMENT
<p><b>Hair loss.</b> Your hair will fall out 2-4 weeks after treatment begins with Docetaxel. Your scalp may feel tender. You may lose hair on your face and body. In most cases, your hair will grow back once your chemotherapy treatments are over and sometimes between treatments. Rarely, hair may not grow back for more than two years. The colour and texture of the new hair growth may be different.</p>	<p>Refer to the pamphlet <i>For the Patient: Hair loss due to chemotherapy</i>.<sup>*</sup> You may also want to:</p> <ul style="list-style-type: none"> <li>• Apply mineral oil to your scalp to reduce itching.</li> <li>• If you lose your eyelashes and eyebrows, protect your eyes from dust and grit with a broad-rimmed hat and glasses.</li> </ul>
<p><b>Fatigue</b> is common especially in the first week after your iv treatment. As the number of chemotherapy cycles increases, fatigue may get worse or last longer.</p>	<ul style="list-style-type: none"> <li>• Your energy level will improve with time after treatment is completed.</li> <li>• Try the ideas in <i>Your Bank of Energy Savings: How People with Cancer Can Handle Fatigue</i>.<sup>*</sup></li> </ul>
<p><b>Mouth sores</b> may occur a few days after chemotherapy treatment begins each time, and may last days or weeks. Mouth sores can occur on the tongue, gums, and the sides of the mouth or in the throat.</p>	<ul style="list-style-type: none"> <li>• Brush your teeth gently after eating and at bedtime with a very soft toothbrush. If your gums bleed, use gauze instead of a brush. Use baking soda instead of toothpaste.</li> <li>• Try baking soda mouth rinses (using 1/2 tsp baking soda in 1 cup warm water) and rinse several times a day. Try ideas in <i>Easy to chew, easy to swallow food ideas</i>.<sup>*</sup></li> <li>• Tell your doctor about a sore mouth, as your chemotherapy doses may need to be decreased if mouth sores are severe. Call your doctor if you are having difficulty eating or drinking due to pain.</li> </ul>
<p><b>Hand-foot skin reaction</b> may occur during capecitabine treatment. The palms of your hands and soles of your feet may tingle, become red, numb, painful, or swollen. Skin may also become dry or itchy. You may not be able to do your normal daily activities if blisters, severe pain or ulcers occur.</p>	<ul style="list-style-type: none"> <li>▪ Avoid tight-fitting shoes or rubbing pressure to hands and feet, such as that caused by heavy activity.</li> <li>▪ Avoid tight-fitting jewellery.</li> <li>▪ Clean hands and feet with lukewarm water and gently pat to dry; avoid hot water.</li> <li>▪ Apply a sunscreen with an SPF (sun protection factor) of at least 30.</li> <li>▪ Apply lanolin-containing creams (eg, BAG BALM®, UDDERLY SMOOTH®) to hands and feet, liberally and often.</li> <li>▪ Tell your cancer doctor at the next visit if you have any signs of hand-foot skin reaction.</li> <li>• Stop taking capecitabine and call your cancer doctor if the skin reaction is painful, as your dose may need to be changed. Taking a lower dose does not affect the usefulness of capecitabine.</li> </ul>

SIDE EFFECT	MANAGEMENT
<p><b>Nail changes</b> such as change in colour may occur. Rarely, nails will loosen or fall off, or the nailbeds will be painful.</p>	<ul style="list-style-type: none"> <li>• You may be given frozen gloves to wear on your hands during your treatment to help prevent nail changes.</li> <li>• You may take acetaminophen (e.g. TYLENOL®) up to every 4 hours if nails are painful to a maximum of 4 g (4000 mg) per day</li> </ul>
<p><b>Diarrhea</b> may occur between treatments.</p>	<p>To help diarrhea:</p> <ul style="list-style-type: none"> <li>• Drink plenty of liquids.</li> <li>• Eat and drink often in small amounts.</li> <li>• Avoid high fiber foods as outlined in <i>Food Ideas to Help with Diarrhea During Chemotherapy</i>.</li> <li>• <b>Note:</b> If lactose in milk usually gives you diarrhea, the lactose in the tablet may be causing your diarrhea. Take LACTAID® tablets just before your Capecitabine dose.</li> <li>• Stop taking Capecitabine and call your cancer doctor if you have four stools a day more than usual or diarrhea during the night, as your dose may need to be changed.</li> </ul>
<p><b>Fluid retention</b> may occur as your treatments go on. Signs of extra fluid build-up are swelling of feet, hands or belly; breathing problems; cough or rapid weight gain</p>	<ul style="list-style-type: none"> <li>• Take your <b>dexamethasone</b> tablets as directed by doctor, pharmacist or nurse. This is usually taken twice a day with food (breakfast and supper) starting the day before your treatment.</li> <li>• Tell your doctor at your next visit.</li> <li>• Elevate your feet when sitting.</li> <li>• Avoid tight clothing.</li> </ul>
<p><b>Pain affecting joints or muscles</b> may occur for a few days after docetaxel. After you stop chemotherapy altogether, you may also feel increased joint aching or stiffness for a few months.</p>	<ul style="list-style-type: none"> <li>• Take ibuprofen (e.g., ADVIL®) or acetaminophen (e.g. TYLENOL®) for mild to moderate pain. Contact your cancer doctor if your pain is severe.</li> <li>• Your family doctor can help you to manage symptoms of joint pain after chemotherapy.</li> </ul>
<p>Your skin may <b>sunburn easily</b>.</p>	<p>To help prevent sunburn:</p> <ul style="list-style-type: none"> <li>• Avoid direct sunlight.</li> <li>• Wear a hat, long sleeves and long pants or skirt outside on sunny days.</li> <li>• Apply a sun block lotion with an SPF (sun protection factor) of at least 30.</li> </ul>

\*available through your nurse or nutritionist

\*\* available through your nurse

Side effects of the dexamethasone premedication and management:

SIDE EFFECTS	MANAGEMENT
<p><b>Heartburn</b> may occur.</p>	<ul style="list-style-type: none"> <li>• Take your dexamethasone after eating.</li> <li>• Take an antacid one hour before or two hours after dexamethasone if you have heartburn. Antacids can reduce the amount of dexamethasone absorbed when taken at the same time.</li> <li>• Avoid ASA (eg, ASPIRIN®) or ibuprofen (eg, ADVIL®) when possible, as this can increase heartburn or stomach irritation also.</li> <li>• Notify your oncologist if you have had ulcers, hiatus hernia, or reflux problems.</li> </ul>
<p><b>Blood sugar</b> may be elevated, especially in diabetics.</p>	<p>Check your blood sugar regularly if you are diabetic. Seek medical advice if your readings are poorly controlled.</p> <ul style="list-style-type: none"> <li>• If you have an unexpected degree of thirst and have to urinate very frequently, you should contact your treatment clinic to get your blood sugar tested.</li> </ul>
<p>You may have <b>difficulty in falling asleep</b> on the days you take dexamethasone. You may feel restless or anxious, or find that your moods are more variable.</p>	<ul style="list-style-type: none"> <li>• Mild exercise before bed (such as a walk around the block) may help.</li> <li>• Avoid caffeine and other stimulants.</li> <li>• If the problem seems very difficult, discuss this with your oncologist.</li> </ul>
<p><b>Swelling</b> of hands, feet or lower legs may occur if your body retains extra fluid. This is usually temporary.</p>	<ul style="list-style-type: none"> <li>• Elevate your feet when sitting.</li> <li>• Avoid tight clothing.</li> <li>• Avoid food with high in salt or sodium.</li> </ul>

**If you experience symptoms or changes in your body that have not been described above but worry you, or if any symptoms are severe, contact**

\_\_\_\_\_ at telephone number \_\_\_\_\_