

For the Patient: BRAJPNCT

Other Names: Alternative Neoadjuvant or Adjuvant Therapy for Breast Cancer using PACLitaxel NAB (ABRAXANE), CARBOplatin and Trastuzumab

BR = BReast AJ = AdJuvantPN = Paclitaxel NAB (ABRAXANE®)

C = Carboplatin T = Trastuzumab

ABOUT THESE MEDICATIONS

What are these drugs used for?

- Trastuzumab (tras too' zoo mab) is a drug that is used to treat some types of cancer. It is a monoclonal antibody, a type of protein designed to target and interfere with the growth of cancer cells. It is a clear liquid that is injected into a vein, intravenously
- Paclitaxel NAB (pak" li tax' el nab) is a drug known as a nanoparticle, albumin-bound paclitaxel and is used to treat some types of cancer. It is a liquid that is injected into a vein, intravenously (IV).
- Paclitaxel NAB is often referred to as nab-paclitaxel or ABRAXANE[®], which is the brand name of the drug.
- Paclitaxel NAB is used for patients with previous unmanageable hypersensitivity reactions to paclitaxel or docetaxel.
- Carboplatin (KAR-boe-plat-in) is a drug that is used to treat many kinds of cancers. It is a clear liquid that is injected into a vein, intravenously (IV).

How do these drugs work?

- Trastuzumab helps your immune system to interfere with how cancer cells grow and divide
- Paclitaxel NAB and carboplatin are anticancer drugs that work by interfering with the genetic material of replicating cells and preventing an increase in the number of cancer cells.

TREATMENT SUMMARY

How are these drugs given?

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- Your treatment plan consists of 'cycles'. Each cycle lasts 3 weeks (21 days).
- The number of total planned cycles will be determined by your oncologist.
- Initially for each cycle, you will have three medications given to you intravenously (through the vein) on day 1.
 - o Trastuzumab is given over approximately half-an-hour to one-and-a-half hours (30 to 90 minutes).
 - o Paclitaxel NAB is given over approximately half-an-hour (30 minutes)
 - Carboplatin is given over approximately half-an-hour (30 minutes)

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The calendar outlines your overall initial treatment plan:

С	DATE	TREATMENT PLAN	
Y		► Week 1 → Day 1: Trastuzumab, Paclitaxel NAB, and Carboplatin	
C		Week 2 → No chemotherapy	
E			
1		Week 3 → No chemotherapy	

This 21-day cycle with all three medications will repeat until your treatment is completed. as determined by your oncologist.

You will then receive ongoing treatment with only trastuzumab to complete one year of trastuzumab treatment.

What will happen when I get my drugs?

- A blood test will be taken before the start of treatment and before each treatment. The dose and timing of your treatment may be changed based on the test results and/or other side effects.
- Your very first treatment will take longer than other treatments because a nurse will be reviewing the possible side effects of your chemotherapy plan and will discuss with you how to manage them. It is a good idea to bring someone with you to your first chemotherapy appointment.
- You will be given a prescription for anti-nausea drugs to take 30 minutes before the carboplatin. (to be filled at your regular pharmacy). Please bring your anti-nausea medication with you for each treatment. Your nurse will tell you when to take the antinausea medication.

SIDE EFFECTS AND WHAT TO DO ABOUT THEM

Unexpected and unlikely side effects can occur with any drug treatment. The ones listed below are particularly important for you to be aware of as they are directly related to the common actions of the drugs in your treatment plan.

Your doctor will review the risks of treatment and possible side effects with you before starting treatment. The chemotherapy nurse will review possible side effects of the drugs and how to manage those side effects with you on the day you receive your first treatment.

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SIDE EFFECTS	MANAGEMENT
Allergic reactions may rarely occur to trastuzumab. Signs of an allergic reaction	Tell your nurse <i>immediately</i> if this happens while you are receiving
may include chills, fever, shivering, nausea, vomiting, headache, dizziness, problems breathing, rash and weakness during the infusion. Reactions are less	trastuzumab. • Your trastuzumab may be temporarily stopped and then given more slowly when restarted.
common with later treatments even if you have a reaction with the first treatment.	 You may be given other drugs to treat the reaction.
	Contact your oncologist <i>immediately</i> if this happens after you leave the clinic
Allergic reactions may rarely occur to paclitaxel NAB. Signs of an allergic reaction may include flushing, dizziness, breathing problems, fast or uneven heart beat, or chest pain. This can occur immediately or several hours after receiving paclitaxel NAB.	Tell your nurse if this happens while you are receiving paclitaxel NAB or contact your oncologist <i>immediately</i> if this happens after you leave the clinic.
Allergic reactions may rarely occur to carboplatin. Signs of an allergic reaction may include rash, itching, fever, dizziness, or breathing problems. This can occur immediately or several	Tell your nurse if this happens while you are receiving carboplatin or contact your oncologist <i>immediately</i> if this happens after you leave the clinic.
hours after receiving carboplatin. Paclitaxel NAB burns if it leaks under the skin.	Tell your nurse or doctor <i>immediately</i> if you feel burning, stinging, or any other change while the drug is being given.
Pain or tenderness may occur where the needle was placed	Apply cool compresses or soak in cool water for 15-20 minutes several times a day.
Nausea and vomiting may occur after your treatment. If you are vomiting and it is not controlled, you can quickly become dehydrated. Most people have little or no nausea.	You may be given a prescription for antinausea drug(s) to take before your treatment and/or at home. It is easier to prevent nausea than treat it once it has occurred, so follow directions closely.
	 Drink plenty of fluids. Eat and drink often in small amounts. Try the ideas in <i>Practical Tips to Manage Nausea.</i>*
	 Tell your healthcare team if nausea or vomiting continues or is not controlled with your antinausea drug(s).

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SIDE EFFECTS	MANAGEMENT
Fever may rarely occur shortly after treatment with trastuzumab. Fever should last no longer than 24 hours.	 Take acetaminophen (e.g., TYLENOL®) every 4-6 hours, to a maximum of 4 g (4000 mg) per day. Fever (over 38°C or 100°F by an oral thermometer) which occurs more than a few days after treatment may be a sign of an infection. Report this to your healthcare team <i>immediately</i>
Diarrhea may sometimes occur. If you have diarrhea and it is not controlled, you	If diarrhea is a problem:
can quickly become dehydrated.	Drink plenty of fluids.Eat and drink often in small amounts.
	 Avoid high fibre foods as outlined in Food Choices to Help Manage Diarrhea.*
	Tell your healthcare team if you have diarrhea for more than 24 hours
Constipation may sometimes occur.	 Exercise if you can. Drink plenty of fluids. Try ideas in Food Choices to Manage Constipation.*
Normal white blood cells protect your	To help prevent infection:
body by fighting bacteria (germs) that cause infection. When they are low, you	Wash your hands often and always after using the bathroom.
are at greater risk of having an infection	Avoid crowds and people who are sick.
IIIIGCUOII	Call your healthcare team <i>immediately</i> at the first sign of an infection such as fever (over 38°C or 100°F by an oral thermometer), chills, cough, or burning when you pass urine.

SIDE EFFECTS	MANAGEMENT
Normal platelets help your blood to clot normally after an injury (e.g., cut). When the platelet count is low, you may be more likely to bruise or bleed.	 To help prevent bleeding problems: Try not to bruise, cut, or burn yourself. Clean your nose by blowing gently. Do not pick your nose. Avoid constipation. Brush your teeth gently with a soft toothbrush as your gums may bleed more easily. Maintain good oral hygiene. Some medications such as ASA (e.g., ASPIRIN®) or ibuprofen (e.g., ADVIL®) may increase your risk of bleeding. Do not stop taking any medication that has been prescribed by your doctor (e.g., ASA for your heart). For minor pain, try acetaminophen (e.g., TYLENOL®) first, but occasional use of ibuprofen may be acceptable.
Muscle or joint pain may sometimes occur a few days after your treatment.	You may take acetaminophen (e.g., TYLENOL®) every 4-6 hours to a maximum of 4 g (4000 mg) per day or ibuprofen (e.g., ADVIL®) for mild to moderate pain. Tell your healthcare team if the pain interferes with your activity.
Swelling of hands, feet, or lower legs may rarely occur if your body retains extra fluid.	If swelling is a problem:Elevate your feet when sitting.Avoid tight clothing.
Loss of appetite sometimes occurs.	Try the ideas in Food Ideas to Help with Decreased Appetite.*
Tiredness and lack of energy may sometimes occur.	 Do not drive a car or operate machinery if you are feeling tired. Try the ideas in Fatigue/Tiredness – Patient Handout.*
Hair loss is common and may begin within a few days or weeks of treatment. Your hair may thin or you may lose it completely. Your scalp may feel tender. Hair loss may occur on your face and body. Hair usually grows back once your treatments are over and sometimes between treatments. Colour and texture may change.	 Refer to Resources for Hair Loss and Appearance Changes – Patient Handout.* You may also want to: Apply mineral oil to your scalp to reduce itching. If you lose your eyelashes and eyebrows, protect your eyes from dust and grit with a broad-rimmed hat and glasses.

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SIDE EFFECTS	MANAGEMENT
Numbness or tingling of the fingers or toes commonly occurs. This will slowly	Be careful when handling items that are sharp, hot, or cold.
return to normal once your treatments are over. This may take several months.	 Be careful when walking on uneven surfaces or doing activities that need you to balance or be steady.
	Tell your healthcare team at your next visit if you have trouble with buttons, writing, picking up small objects, walking, or have fallen.
Headache may sometimes occur.	Take acetaminophen (e.g., TYLENOL®) every 4-6 hours if needed, to a maximum of 4 g (4000 mg) per day.

^{*}Please ask your chemotherapy nurse or pharmacist for a copy.

INSTUCTIONS FOR THE PATIENT:

- Tell your doctor if you have ever had an unusual or allergic reaction to trastuzumab, carboplatin, cisplatin, paclitaxel NAB, or human albumin before starting this treatment
- The drinking of alcohol (in small amounts) does not appear to affect the safety or usefulness of trastuzumab, paclitaxel NAB, or carboplatin.
- Trastuzumab, Paclitaxel NAB and carboplatin may damage sperm and harm the baby if used during pregnancy. It is best to use **birth control** while being treated with these drugs, and for at least seven months after trastuzumab treatment has ended.
 Tell your doctor right away if you or your partner becomes pregnant. Do not breast feed during treatment.
- Tell doctors, dentists, or other health professionals that you are being treated with trastuzumab, paclitaxel NAB, and carboplatin before you receive any treatment from them.

THE FOLLOWING INFORMATION IS VERY IMPORTANT

SEE YOUR DOCTOR OR GET EMERGENCY HELP IMMEDIATELY IF YOU HAVE:

- Signs of an **allergic reaction** (rare) soon after a treatment including dizziness, fast heart beat, face swelling or breathing problems.
- Signs of **heart** or **lung problems** such as fast or uneven heartbeat, chest pain, chest pressure, shortness of breath or difficulty breathing, or fainting.
- Signs of an infection such as fever (over 100°F or 38°C by an oral thermometer), shaking chills; severe sore throat, productive cough (coughing up thick or green sputum); cloudy or foul smelling urine; painful, tender, or swollen red skin wounds or sores.
- Signs of bleeding problems such as black, tarry stools; blood in urine; pinpoint red spots on skin; extensive bruising.

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SEE YOUR DOCTOR AS SOON AS POSSIBLE (DURING OFFICE HOURS) IF YOU HAVE:

- Signs of anemia such as unusual tiredness or weakness.
- Numbness or tingling in face, feet, or hands or weakness in facial muscles.
- Changes in eyesight, sensitivity to light, or eye pain.
- Signs of liver problems such as yellow eyes or skin, white or clay-coloured stools.
- Signs of kidney problems such as lower back or side pain, swelling of feet or lower legs, numbness or tingling in feet or hands
- Increased sore throat or mouth or that makes it difficult to swallow comfortably.
- Uncontrolled nausea, vomiting, or diarrhea.
- Ringing in your ears or hearing problems.
- Skin rash or itching.
- Stomach pain not controlled by antacids or acetaminophen.

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

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