

For the Patient: DOC7

Other names: BRAVDOC7

DOC Docetaxel

7 Indicates treatment is weekly

BC Cancer Agency

<u>Uses</u>:

• BRAVDOC7 is an intravenous drug treatment 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 about 3-4 chemotherapy cycles (about 6-8 months). A cycle length is 8 weeks. Docetaxel will be given intravenously weekly at every visit for the first 6 weeks out of 8. For each week of treatment, 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 treatment will take about 30 minutes. You will be asked to take Dexamethasone 8 mg (usually 2 x 4mg pills), one hour 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 very infrequent with this regimen.
- Drink reasonable amounts of fluids for the first day or two after chemotherapy (6-8 cups a day).
- 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 BRAVDOC7.
- 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 BRAVDOC7 before you receive any treatment from them.
- If you are still having menstrual periods, BRAVDOC7 may cause your ovaries to stop working, resulting in menopausal symptoms (such as hot flushes) 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 <u>not</u> 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 may be lowered by the chemotherapy. Your blood count is expected to be adequate prior to each treatment, and will be normal after the chemotherapy is stopped for good. Though it is not common with weekly docetaxel, 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 <u>immediately</u> (24 hours a day) or go <u>immediately</u> 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 will be checked each week prior to chemotherapy. Although it is uncommon with weekly docetaxel, 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. 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.

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
Nausea and vomiting can very infrequently occur with weekly 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.	 You will be given a prescription for anti-nausea drugs to take before your IV treatment and afterwards at home, if needed. It is easier to prevent nausea than treat it once it has occurred, so follow directions closely. Refer to pamphlets on how to deal with nausea and vomiting given to you by your nurse at your centre.

SIDE EFFECT	MANAGEMENT
Allergic reactions 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.	 Dexamethasone is used to help prevent allergic reactions. Doses of anti-allergic medications may be given if you have an allergic reaction despite this. Your nurse will check your heart rate (pulse) and blood pressure if needed. Tell your nurse or doctor <i>immediately</i> if you have any sign of an allergic reaction
Hair loss. Your hair may thin or start to fall out 2-4 weeks after treatment begins. Your scalp may feel tender. You may lose hair on your face and body. Your hair will grow back once your chemotherapy treatments are over and sometimes between treatments. The colour and texture of the new hair growth may be different.	 Refer to the pamphlet <i>For the Patient: Hair</i> <i>loss due to chemotherapy.</i>* 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.
Fatigue is common especially as the number of chemotherapy cycles increases.	 Your energy level will improve with time after treatment is completed. Try the ideas in Your Bank of Energy Savings: How People with Cancer Can Handle Fatigue.*
Mouth sores may occur during the chemotherapy cycle and may last days or weeks. Mouth sores can occur on the tongue, gums, and the sides of the mouth or in the throat.	 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. 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>. 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.
Nail changes such as change in colour may occur. Infrequently, nails will loosen or fall off, or the nailbeds will be painful.	 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

SIDE EFFECT	MANAGEMENT
Diarrhea may occur between treatments.	 To help diarrhea: Drink plenty of liquids. Eat and drink often in small amounts. You can purchase Loperamide (e.g., IMODIUM®) over the counter if diarrhea is persistent. Don't take this if you have abdominal pain, blood in your stool, or fever. In that case, consult your doctor promptly for tests.
	Avoid high fiber foods as outlined in <i>Food</i> Ideas to Help with Diarrhea During Chemotherapy.
Fluid retention 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	 Take your dexamethasone tablets as directed by doctor, pharmacist or nurse. Tell your doctor at your next visit. Elevate your feet when sitting. Avoid tight clothing.
Pain affecting joints or muscles may occur for a few days after each docetaxel. After you stop chemotherapy altogether, you may also feel increased joint aching or stiffness for a few months.	 Take ibuprofen (e.g., ADVIL®) or acetaminophen (e.g. TYLENOL®) for mild to moderate pain. Contact your cancer doctor if your pain is severe. Your family doctor can help you to manage symptoms of joint pain after chemotherapy.
Scarring in the tear duct. With weekly docetaxel, some people develop a blockage in the tear duct which drains tears from the eye, into the nose. If this happens, you may find that tears begin running constantly down your cheek, and they may cause your vision to blur.	 Advise your cancer doctor if you are having this difficulty.

** available through your nurse

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