For the Patient: GIIRINALT
Other Names: Palliative chemotherapy for metastatic colorectal cancer using weekly Irinotecan

GI = GastroIntestinal
IRIN = Irinotecan
ALT = Alternate protocol

ABOUT THIS MEDICATION

What are these drugs used for?
• Irinotecan is a drug given to treat cancer of the colon or rectum. It is given directly into the vein, or intravenously (IV).

How do these drugs work?
• Irinotecan works by interfering with dividing cells and preventing an increase in the number of cancer cells.

INTENDED BENEFITS
• This therapy is being given to destroy and/or limit the growth of cancer cells in your body. This treatment may improve your current symptoms, and delay the onset of new symptoms.
• It may take at least two cycles of treatment before your doctor can judge whether or not this chemotherapy is helping.

TREATMENT SUMMARY

How are these drugs given?
• You will receive one intravenous (IV) chemotherapy drug called Irinotecan. It will be given to you at the clinic by a chemotherapy nurse. Each treatment will take about 2 hours. Your first treatment will probably take longer, as the nurse will review information on the chemotherapy drug with you.
• The treatment is repeated every week for 4 weeks in a row, with a 2 week rest period where no drug is given. This 6 week or 42-day period of time is called a “cycle”. The cycle is usually repeated up to a maximum of 6 cycles, but may be changed depending on how the chemotherapy affects you.

The calendar on the following page outlines your overall treatment plan.
<table>
<thead>
<tr>
<th>CYCLE 1</th>
<th>DATE</th>
<th>TREATMENT PLAN</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Week 1</td>
<td>Irinotecan IV x 1 day</td>
</tr>
<tr>
<td></td>
<td>Week 2</td>
<td>Irinotecan IV x 1 day</td>
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<tr>
<td></td>
<td>Week 3</td>
<td>Irinotecan IV x 1 day</td>
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<tr>
<td></td>
<td>Week 4</td>
<td>Irinotecan IV x 1 day</td>
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<tr>
<td></td>
<td>Week 5</td>
<td>No Treatment</td>
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<tr>
<td></td>
<td>Week 6</td>
<td>No Treatment</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CYCLE 2</th>
<th>DATE</th>
<th>TREATMENT PLAN</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Week 1</td>
<td>Irinotecan IV x 1 day</td>
</tr>
<tr>
<td></td>
<td>Week 2</td>
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<td>Week 5</td>
<td>No Treatment</td>
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<td>No Treatment</td>
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</tbody>
</table>

Treatment is continued for a total of 6 cycles, as long as you are benefitting from treatment and not having too many side effects.

What will happen when I get my drugs?
- A blood test is done each cycle, on or before the first day of each treatment cycle. The dose and timing of your chemotherapy may be changed based on your blood counts and/or other side effects.

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 know as they are directly related to the common actions of the drug 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 drug and how to manage those side effects.
### SERIOUS SIDE EFFECTS DURING TREATMENT

<table>
<thead>
<tr>
<th>Nausea and vomiting</th>
<th>Early diarrhea</th>
<th>Late diarrhea</th>
</tr>
</thead>
<tbody>
<tr>
<td>May occur after your treatment and may last for 24 hours.</td>
<td>May occur during or shortly after an irinotecan treatment (within 24 hours). It starts with watery eyes, stomach cramps and sweating.</td>
<td>May occur one day to several days after an irinotecan treatment. It starts with stools more loose or often than usual.</td>
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</tbody>
</table>

### MANAGEMENT

- **Nausea and vomiting**
  - You will be given a prescription for an antinausea drug(s) to take before your chemotherapy 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 liquids.
  - Eat and drink often in small amounts.
  - Try the ideas in the *Practical Tips to Help Manage Nausea*.

- **Early diarrhea**
  - Tell your nurse or doctor **immediately** if you have watery eyes, stomach cramps or sweating during or after your treatment.
  - Early diarrhea is treated with a medication called atropine, which is injected into a vein or under your skin. If your cancer centre is closed, your cancer doctor may tell you to go to your Hospital Emergency for atropine treatment.

- **Late diarrhea**
  - Late diarrhea must be treated **immediately** with loperamide 2 mg tablets (eg, Imodium®):
    - Take **TWO tablets** at the first sign of loose or more frequent stools than usual.
    - Then take **ONE tablet** every **TWO hours** until diarrhea has stopped for 12 hours.
    - At night, you may take **TWO tablets** every **FOUR hours** (set your alarm) during the time you usually sleep.
    - **This dose is much higher than the package directions. It is very important that you take this higher dose to stop the diarrhea.**
    - Always keep a supply of loperamide (eg, have 48 tablets on hand). You can buy loperamide at any pharmacy without a prescription.
  - To help diarrhea:
    - Drink plenty of liquids.
    - Eat and drink often in small amounts.
    - Avoid high fiber foods as outlined in *Food Ideas to Help Manage Diarrhea*.
    - A dietitian can give you more suggestions for dealing with diarrhea.
  - If diarrhea does not improve 24 hours after starting loperamide or lasts more than 36 hours, call your doctor.
### SERIOUS SIDE EFFECTS DURING TREATMENT
Your **white blood cells** will decrease 1 week after your treatment. They usually return to normal 3 weeks after your treatment. White blood cells protect your body by fighting bacteria (germs) that cause infection. When they are low, **you are at greater risk of having an infection**.

**MANAGEMENT**
To help prevent infection:
- Wash your hands often and always after using the bathroom.
- Take care of your skin and mouth.
- Avoid crowds and people who are sick.
- Call your doctor **immediately** at the first sign of an infection such as fever (over 100°F or 38°C by an oral thermometer), chills, cough, or burning when you pass urine.

### OTHER SIDE EFFECTS DURING TREATMENT

<table>
<thead>
<tr>
<th>Side Effect</th>
<th>Management</th>
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</thead>
<tbody>
<tr>
<td><strong>Constipation</strong> may occur.</td>
<td>To help constipation:</td>
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<tr>
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<td>- Exercise if you can.</td>
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<td></td>
<td>- Drink plenty of fluids (8 cups a day).</td>
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<td>- Add prunes or prune juice.</td>
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<td></td>
<td>- Eat foods high in fibre such as bran, whole grain breads and cereals, nuts, fruits and vegetables.</td>
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<tr>
<td></td>
<td>- Try ideas in Suggestions for Dealing with Constipation.</td>
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<tr>
<td><strong>Sore mouth</strong> may sometimes occur a few days after treatment. Mouth sores can occur on the tongue, the sides of the mouth, or in the throat. <strong>Mouth sores or bleeding gums can lead to an infection.</strong></td>
<td><strong>MANAGEMENT</strong></td>
</tr>
<tr>
<td></td>
<td>- 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.</td>
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<td></td>
<td>- Make a mouthwash with ½ teaspoon baking soda or salt in 1 cup warm water and rinse several times a day.</td>
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<td>- Try soft, bland foods like puddings, milkshakes and cream soups.</td>
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<td></td>
<td>- Avoid spicy, crunchy or acidic food, and very hot or cold foods.</td>
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<tr>
<td></td>
<td>- Try the ideas in Food Ideas to Try with a Sore Mouth*</td>
</tr>
<tr>
<td><strong>Swelling</strong> of hands, feet or lower legs may occur if your body retains extra fluid.</td>
<td>If swelling is a problem:</td>
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<td>- Elevate your feet when sitting.</td>
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<td>- Avoid tight clothing.</td>
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<tr>
<td><strong>Headaches</strong> may occur. These are usually mild.</td>
<td>Take acetaminophen (eg, Tylenol®) to decrease or stop the headache.</td>
</tr>
</tbody>
</table>
### OTHER SIDE EFFECTS DURING TREATMENT

| Tiredness and lack of energy may commonly occur. | • Do not drive a car or operate machinery if you are feeling tired.  
• Try the ideas in *Your Bank of Energy Savings: Helping People with Cancer Handle Fatigue.* |
|---|---|
| You may have trouble sleeping. | • Talk to your doctor if your trouble in sleeping continues to bother you.  
• This will return to normal when you stop treatment with irinotecan. |
| 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. In most cases, your hair will grow back once your treatments are over and sometimes between treatments. Colour and texture may change. | • Use a gentle shampoo and soft brush.  
• Care should be taken with hair spray, bleaches, dyes and perms.  
• Protect your scalp with a hat, scarf or wig in cold weather. Some extended health plans will pay part of the cost of a wig.  
• Cover your head or apply sunblock on sunny days.  
• 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 |
| 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. |

*Please ask your chemotherapy nurse, pharmacist or dietician for a copy.

### INSTRUCTIONS FOR THE PATIENT

- Tell your doctor if you have ever had an usual or allergic reaction to irinotecan before treatment begins.
- The *drinking of alcohol* (in small amounts) does not appear to affect the safety or usefulness of irinotecan.
- Irinotecan may damage sperm and may harm the baby if used during pregnancy. It is best to use *birth control* while being treated with irinotecan. Tell your doctor right away if you or your partner becomes pregnant. Do not breast feed during treatment
- Tell doctors, dentists, and other health professionals that you are being treated with irinotecan before you receive any treatment from them.
Medication Interactions

- Other drugs such as laxatives, seizure medicines, St. John’s Wort, dexamethasone, and prochlorperazine may interact with irinotecan.
  - Dexamethasone can be taken as an antinausea drug. Discuss with your cancer doctor if you are taking dexamethasone on a daily basis.
  - Prochlorperazine should not be taken as an antinausea drug on the day of your irinotecan treatment.

Tell your doctor if you are taking these or any other drugs as you may need extra blood tests or your dose may need to be changed. Check with your doctor or pharmacist before you start taking any new drugs.

THE FOLLOWING INFORMATION IS VERY IMPORTANT

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

- Signs of an infection such as fever (over 100°F or 38°C by an oral thermometer); chills; cough; pain or burning when you pass urine.
- Diarrhea that occurs within the first 24 hours after irinotecan treatment.
- Signs of severe fluid loss due to diarrhea such as fainting, light-headedness or dizziness.

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

- Severe diarrhea that occurs after the first 24 hours and does not improve 24 hours after starting loperamide or lasts more than 36 hours.
- Signs of anemia such as unusual tiredness or weakness.
- Signs of lung problems such as shortness of breath or difficulty breathing.
- Signs of liver problems such as yellow eyes or skin, white or clay-coloured stools.

CHECK WITH YOUR DOCTOR IF ANY OF THE FOLLOWING CONTINUE OR BOTHER YOU:

- Uncontrolled nausea and/or vomiting.
- Easy bruising or bleeding.
- Redness, swelling, pain or sores where the needle was placed.
- Redness, swelling, pain or sores on your lips, tongue, mouth or throat.
- Trouble sleeping.
- Skin rash.

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:________________________