For the Patient: **GOCXCATB**

Other Names: Primary Treatment of Metastatic or Recurrent Squamous Cancer of the Cervix with Bevacizumab, Carboplatin and Paclitaxel

**GO = Gynecologic Oncology (tumor group)**
**CX = Cervix**
**CA = Carboplatin**
**T = Paclitaxel (TAXOL®)**
**B = Bevacizumab**

**ABOUT THIS MEDICATION**

**What are these drugs used for?**
Bevacizumab, Carboplatin, and Paclitaxel are intravenous (IV) drug treatments used to treat some types of cancers including cervical cancer. They may be given in addition to the surgery done to remove all visible cancer. You may receive all of your treatments prior to surgery, or may have surgery prior to your treatments, or have surgery after three to four treatments. Some patients will not be advised to have surgery. Your cancer doctors will explain to you the timing in your case.

**How do these drugs work?**
Carboplatin and Paclitaxel work by interfering with the genetic material of replicating cells and preventing an increase in the number of cancer cells. Bevacizumab is a monoclonal antibody, which is a protein that targets a specific growth factor of certain cancer cells in order to stop the growth of the tumour.

**INTENDED BENEFITS**
- This therapy is being given to destroy and/or limit the growth of cancer cells in your body. It may reduce the chance of your cervical cancer coming back, or delay the time until the cancer relapses significantly. Research has shown that patients are likely to live longer after receiving chemotherapy treatment.

**GOCXCATB TREATMENT SUMMARY**

**How are these drugs given?**
- Your treatment plan consists of up to six chemotherapy “cycles”. Each cycle lasts 3 weeks (21 days). In some cases, it may be decided that each cycle last 4 weeks (28 days) instead. Your doctor would discuss this with you.
- For each cycle, you will have the three medications given to you intravenously (through the vein) on Day 1.
  - The Paclitaxel is given first, and is given intravenously over three hours. To help prevent allergic reactions to Paclitaxel you will be given two additional intravenous medications (“pre-meds”) before the Paclitaxel
  - The Carboplatin is given second, and is given intravenously over half-an-hour.
- The Bevacizumab is given third, intravenously over one hour in the first cycle, and over half-an-hour in the cycles after that.

What will happen when I get my drugs?
- A blood test is done each cycle, on or about the day before each treatment day. The dose and timing of your treatment may be changed based on your blood counts and/or other side effects.
- Your 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 medications (to be filled at your regular community pharmacy). Please bring your anti-nausea medications with you to each treatment. Your nurse will tell you when to take the anti-nausea medication.
- You will also need to take your anti-nausea drugs at home after therapy. It is easier to prevent nausea than to treat it once it has occurred, so follow directions closely.
- Your blood pressure will be checked by a nurse and a urine test will be done before each treatment. For the first three cycles, your blood pressure will be checked both before and after the Bevacizumab infusion. The dose and timing of your therapy may be changed based on your blood pressure, urine test results, and/or other side effects.

Start Date: ____________________________

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<tr>
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<th>Day 1</th>
<th>Day 2</th>
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<tbody>
<tr>
<td><strong>Blood Test, Premedications, Paclitaxel, Carboplatin, Bevacizumab</strong></td>
<td>No chemo</td>
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<td>Day 8</td>
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This 21-day (or 28-day) cycle will repeat up to 5 times
SERIOUS SIDE EFFECTS OF CHEMOTHERAPY:
Unexpected and unlikely side effects can occur with any drug treatment. The ones listed below are particularly relevant to your treatment plan:

<table>
<thead>
<tr>
<th>SERIOUS SIDE EFFECTS</th>
<th>How Common Is It?</th>
<th>MANAGEMENT</th>
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</table>
| **Allergic reactions** to Paclitaxel occasionally occur, usually while you are receiving it. Signs of an allergic reaction include flushing, rash, itching, swelling, chest or back pain, and breathing problems. Allergic reactions to Carboplatin are less common. | Uncommon after pre-treatment with anti-allergy drugs | • Dexamethasone is used to prevent allergic reactions. You will be given Dexamethasone before you receive Paclitaxel.  
• You will also be given other drugs to help prevent an allergic reaction. One (an anti-histamine) may make you drowsy.  
• Your nurse will monitor you for any signs that you may be developing an allergic reaction while receiving Paclitaxel.  
• Tell your nurse or doctor *immediately* if you notice any of the listed symptoms or feel suddenly unwell during treatment. |
| **Your neutrophils** (white blood cells, which protect your body from bacteria) may start to decrease 8-11 days after treatment. They usually return to normal by 5 weeks after your last treatment, if not sooner. When neutrophils are low, you are at greater risk of serious infection from bacteria. | Low neutrophils: very common, Fever and infection: much less common | To help prevent infection:  
• Wash your hands often and always after using the bathroom.  
• Take care of your skin and mouth by gently washing regularly.  
• Avoid people who are obviously sick, and places where small children or the elderly cluster, to reduce your chance of fever.  
• Call your doctor *immediately* at the first sign of an infection such as fever (over 100°F or 38°C by an oral thermometer), shaking chills, coughing up coloured sputum, red tender skin lesions with pus, or burning pain when you pass urine. |
| Paclitaxel contains alcohol and may cause drowsiness. | Problems are rare | • Do not drive a car or operate machinery soon after treatment. |
| Paclitaxel burns if it leaks under the skin. | Very rare | Tell your nurse *immediately* if you feel pain, burning, stinging, or any other change while the drug is being given. |
**SERIOUS SIDE EFFECTS**

<table>
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| Your **platelets** may decrease starting 8-11 days after your treatment. They usually return to normal by 5 weeks after your last treatment, or sooner. Platelets help to make your blood clot when you hurt yourself. **If platelets are low, you may bruise or bleed more easily than usual.** | To help prevent bleeding problems:  
- Be careful handling sharp or heavy objects and avoid trauma.  
- Clean your nose by blowing gently, do not insert objects in your nose.  
- Try to avoid constipation and straining.  
- Brush your teeth gently with a soft toothbrush as your gums may bleed more easily.  
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 to you 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.  
If a nose bleed occurs, try the following:  
- Sit up straight and tip your head slightly forward. Tilting your head back may cause blood to run down your throat.  
- Pinch your nostrils shut between your thumb and forefinger or apply firm pressure against the bleeding nostril for 10 full minutes.  
- Stay quiet for a few hours and do not blow your nose for at least 12 hours after the bleeding has stopped.  
- Get emergency help if a nosebleed lasts longer than 20 minutes. |
| Decrease in platelets:  
very Common  
Marked decrease in platelets:  
much less common  
Bleeding problems:  
uncommon |  
|
### COMMON CHEMOTHERAPY SIDE EFFECTS AND MANAGEMENT:

<table>
<thead>
<tr>
<th>SIDE EFFECT</th>
<th>How Common Is It?</th>
<th>MANAGEMENT</th>
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<tbody>
<tr>
<td><strong>Hair loss</strong></td>
<td>Very Common</td>
<td>• Use a gentle shampoo and soft brush.</td>
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<td>• Care should be taken with use of hair spray, bleaches, dyes and perms.</td>
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<td>• 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.</td>
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<td>• Cover your head or apply sunblock on sunny days.</td>
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<td>• Apply mineral oil to your scalp to reduce itching.</td>
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<td>• If you lose your eyelashes and eyebrows, protect your eyes from dust and grit with a broad-rimmed hat and glasses.</td>
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<td><strong>Headache</strong></td>
<td>Uncommon</td>
<td>• Take acetaminophen (e.g., TYLENOL®) every 4-6 hours if needed, to a maximum of 4 g (4000 mg) per day.</td>
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<td>• Tell your doctor if headache persists or if it is associated with vomiting, confusion, or visual changes.</td>
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<td><strong>Nausea and/or vomiting</strong></td>
<td>Common; related to the Carboplatin</td>
<td>You will be given a prescription for anti-nausea drug(s) to take before your chemotherapy treatment and/or at home. It is easier to prevent nausea than to treat it once it has happened, so follow directions closely.</td>
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<td>• Eat and drink often in small amounts.</td>
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<td>• Try the ideas in “Food Choices to Control Nausea”.</td>
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<td><strong>Numbness or tingling</strong></td>
<td>Common; usually starts after several treatments</td>
<td>• Be careful when handling items that are sharp, hot or cold.</td>
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<td>• Tell your doctor at your next visit, especially if you have trouble with buttons, writing, or picking up small objects.</td>
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<td><strong>Muscle or joint pain</strong></td>
<td>Very common</td>
<td>You may take acetaminophen (e.g. TYLENOL®) or ibuprofen (e.g. ADVIL®) for mild to moderate pain. Tell your doctor if the pain interferes with your usually daily activities.</td>
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<tr>
<td><strong>Pain or tenderness</strong></td>
<td>Uncommon</td>
<td>Apply cool compresses or soak in cool water for 15-20 minutes several times a day.</td>
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<td>SIDE EFFECT</td>
<td>How Common Is It?</td>
<td>MANAGEMENT</td>
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| Constipation or diarrhea may occur. | Mild symptoms: common | To help constipation:  
• Exercise if you can.  
• Drink plenty of liquids (6-8 cups a day).  
• Consider a stool softener or laxative at the time of chemotherapy, if constipation is particularly related to your treatment week.  
• Try ideas in “Suggestions for Dealing with Constipation”.  
Severe symptoms: rare | To help diarrhea:  
• Drink plenty of liquids.  
• Eat and drink often in small amounts.  
• Avoid high fibre foods.  
• Tell you doctor promptly if you have pain, bleeding, or very frequent bowel movements. |
| Tiredness or lack of energy may occur. | Common | • Do not drive a car or operate machinery if you are feeling tired.  
• Try to keep up a regular schedule of exercise and/or walking during your chemotherapy cycle. Doing light weights regularly may help reduce fatigue.  
• Try the ideas in “Your Bank of Energy Savings: How People with Cancer can Handle Fatigue”. |
| Temporary loss of appetite is common with Carboplatin. | Common | Usually your appetite will recover on its own. You needn’t worry if you have just a few days of reduced intake. Because of tiredness, if you are less active, you may actually gain weight.  
Try ideas in High Energy High Protein Ideas and in Healthy Eating Using High Energy, High Protein Foods. |
| Swelling of hands, feet or lower legs may occur if your body retains extra fluid. | Uncommon | If swelling is a problem:  
• Elevate your feet when resting.  
• Avoid tight clothing. |
| Sore mouth may occur a few days after treatment. Mouth sores can occur on the tongue, the sides of the mouth or in the throat. Mouth sores or bleeding gums can lead to an infection. | Uncommon | • Brush your teeth gently after eating and at bedtime with a very soft toothbrush.  
• Make a mouthwash with ¼ teaspoon baking soda or salt in 1 cup warm water and rinse several times a day. |
INSTRUCTIONS FOR THE PATIENT

What other drugs can interact with GOCXCATB?

- Other drugs such as warfarin (COUMADIN®) and phenytoin (DILANTIN®) may interact with GOCXCATB. Tell your doctor if you are taking these or any other medications, 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 prescription or non-prescription medications.

Other important things to know:

- Drinking alcohol (in small amounts) doesn’t affect the safety or usefulness of this treatment.
- This treatment may cause menopause in women.
- Do not breast feed during treatment.
- Tell all doctors or dentists you see that you are being treated with Carboplatin, Paclitaxel, and Bevacizumab before you receive treatment of any kind.
- If you are planning to have surgery, you should stop Bevacizumab 4 weeks before surgery and not restart Bevacizumab until 4 weeks after surgery and only if the surgical wound is fully healed. This helps to lower the risk of bleeding and may prevent problems with wound healing after surgery.

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.
- Signs of bleeding problems such as black, tarry stools, blood in urine or pinpoint red spots all over your skin.
- Signs of an allergic reaction soon after a treatment including flushing, rash, itching, dizziness, face swelling or breathing problems.
- Signs of a stroke such as sudden onset of: severe headache, eyesight changes, slurred speech, loss of coordination, weakness or numbness in arm or leg.
- Signs of a blood clot such as tenderness or hardness over a vein, calf swelling and tenderness, sudden onset of cough, chest pain, or shortness of breath.
- Signs of heart or lung problems such as fast or uneven heartbeat, chest pain, chest pressure, shortness of breath or difficulty breathing, swelling of ankles or fainting.
- Persistent bleeding, such as nosebleeds lasting more than 20 minutes.
- Sudden abdominal pain or tenderness.
- Severe headache that does not go away, or occurs with vomiting, confusion or changes in eyesight.
- Seizures

TALK TO YOUR CANCER CLINIC DOCTOR AND/OR NURSE AS SOON AS POSSIBLE (DURING OFFICE HOURS) IF YOU HAVE:

- Changes in eyesight, ringing in your ears, or hearing loss.
- Skin rash or persistent itching.
- Unexpected swelling in any of your limbs.
- Uncontrolled nausea, vomiting or diarrhea.
- Signs of anemia such as unusual tiredness or weakness.
- Stomach pain not controlled by antacids or acetaminophen.
- Worsening numbness or tingling in feet or hands.
• **Muscle or joint pain**, which is severe despite mild pain-relievers.
• Signs of **kidney problems** such as swelling of feet or lower legs.
• **Sores** that do not heal or are slow to heal.

**CHECK WITH YOUR DOCTOR IF ANY OF THE FOLLOWING CONTINUE TO BOTHER YOU:**
• Uncontrolled nausea, vomiting, diarrhea, or abdominal pain.
• Changes in mood or memory, or trouble sleeping.
• Easy bruising or bleeding.
• Redness, swelling, pain or sores where the needle was placed or along the arm.
• Redness, swelling, pain or sores on your lips, tongue, mouth or throat.
• Runny or stuffy nose (without other cold symptoms) that does not go away, or occurs with bleeding or crusting of the nose.
• Skin rash or itching.

| 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 _____________________.