

#### For the Patient: HNAVFUP

Treatment for Advanced Squamous Cell Cancer of the Head and Neck using Fluorouracil and Platinum

**HN** = **H**ead and **N**eck (Tumour group)

AV = Advanced

**FU** = **F**luorouracil

**P** = **P**latinum (Cisplatin or Carboplatin)

#### **ABOUT THIS MEDICATION**

## What are these drugs used for?

Fluorouracil, cisplatin, and carboplatin are drugs used to treat many types of cancer. They are clear liquids that are injected into a vein.

## How do these drugs work?

Cisplatin, carboplatin, and fluorouracil interfere with the genetic material (DNA) of cancer cells and prevents them from growing.

#### **INTENDED BENEFITS**

- This therapy is given to destroy and/or limit the growth of cancer cells in your body.
- It is expected to improve your current symptoms, and delay or prevent the new symptoms from starting.
- This treatment is expected to delay the progression of your cancer.

#### **HNAVFUP TREATMENT SUMMARY**

#### How are these drugs given?

- Your treatment plan is given every 4 weeks for a total of 6 times. Each 4 week period is called a cycle.
- Cisplatin is given intravenously once a day for 3 to 4 days. This is repeated every 4
  weeks.
- Or carboplatin is given intravenously once at the beginning of each cycle on day one. This is repeated every 4 weeks.
- You will receive fluorouracil at the clinic by the chemotherapy nurse on day 1 and day 3 of your treatment. The fluorouracil is given using TWO disposable infusion devices called an INFUSOR® or "baby bottle". Each infusion device delivers the fluorouracil slowly and continuously to your body over 48 hours or 2 days. Please see a copy of "Your INFUSOR® A Guide for Patients", available through your chemotherapy nurse. This is repeated every 4 weeks.
- The chemotherapy nurse will connect the infusion device to your IV site at the clinic, and then you can go about your normal pattern of living, while your FIRST fluorouracil infusor device delivers treatment over the 48 hours or 2 days. You will return to clinic on day 3. The SECOND infusion device will be connected to your IV site by the chemotherapy nurse. You can go home while your fluorouracil treatment

BC Cancer Protocol Summary (Patient Version) HNAVFUP Developed: 01 Feb 2012

Developed: 01 Feb 2013 Revised: 1 Nov 2018 is delivered over the next 48 hours. Total time period of IV fluorouracil infusion is 96 hours or 4 days. You may return to the clinic after 4 days for the nurse to disconnect the infusion device, or you will be instructed how to disconnect yourself at home. Some people may be instructed to go to their local hospital to be disconnected, or may have a home care nurse provide this service, if available.

## What will happen when I get my drugs?

- A blood test is done within one month of starting treatment.
- A blood test is done before each treatment cycle. You will be given lab requisitions for these tests to be done on a specific date.
- The dose and timing of your chemotherapy may be changed based on your blood counts and/or other side effects.
- You will be given a prescription for anti-nausea medications (to be filled at your regular pharmacy) that you need to bring to <u>each</u> of your chemotherapy treatments. Your nurse will tell you when to take the anti-nausea medication during your chemotherapy time, and provide a schedule of when to take it while at home. It is easier to prevent nausea than to treat it once is has occurred, so follow the suggestions given to you.

## **HNAVFUP Treatment Protocol**

## Cycle 1:

Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
Cisplatin or Carboplatin Fluorouracil	Cisplatin Fluorouracil	Cisplatin Fluorouracil	(Cisplatin) Fluorouracil	no chemo	no chemo	no chemo
Day 8	Day 9	Day 10	Day 11	Day 12	Day 13	Day 14
no chemo	no chemo	no chemo	no chemo	no chemo	no chemo	no chemo
Day 15	Day 16	Day 17	Day 18	Day 19	Day 20	Day 21
no chemo	no chemo	no chemo	no chemo	no chemo	no chemo	no chemo
Day 22	Day 23	Day 24	Day 25	Day 26	Day 27	Day 28
no chemo	no chemo	no chemo	no chemo	no chemo	no chemo	no chemo
Day29=Day1						
start Cycle 2						

This 28-day cycle may repeat 5 more times.

2/6

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## **CHEMOTHERAPY SIDE EFFECTS AND MANAGEMENT**

## Are there any risks?

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.

SERIOUS SIDE EFFECTS	HOW COMMON IS IT?	MANAGEMENT
Cisplatin, carboplatin, and fluorouracil <b>burns</b> if it leaks under the skin.	rare	Tell your nurse or doctor <i>immediately</i> if you feel burning, stinging, or any other change while the drug is being given.
Nausea and vomiting may occur after your treatment and may last for up to 24 hours. Nausea may last longer for some patients.	very common	You will be given a prescription for 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 Food Choices to Help Control Nausea.*
Your white blood cells may decrease 7-14 days after your treatment. They usually return to normal before your next 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.	common	<ul> <li>To help prevent infection:</li> <li>Wash your hands often and always after using the bathroom.</li> <li>Avoid crowds and people who are sick.</li> <li>Call your doctor <i>immediately</i> 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.</li> </ul>

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SERIOUS SIDE EFFECTS	HOW COMMON IS IT?	MANAGEMENT
Your platelets may decrease 7- 14 days after your treatment. They usually return to normal before your next treatment. Platelets help to make your blood clot when you hurt yourself. You may bruise or bleed more easily than usual.	common	<ul> <li>To help prevent bleeding problems:</li> <li>Try not to bruise, cut, or burn yourself.</li> <li>Clean your nose by blowing gently. Do not pick your nose.</li> <li>Avoid constipation.</li> <li>Brush your teeth gently with a soft toothbrush as your gums may bleed more easily. Maintain good oral hygiene.</li> <li>Some medications such as ASA (e.g., ASPIRIN®) or ibuprofen (e.g., ADVIL®) may increase your risk of bleeding.</li> <li>Do not stop taking any medication that has been prescribed by your doctor (e.g., ASA for your heart).</li> <li>For minor pain, try acetaminophen (e.g., TYLENOL®) first, to a maximum of 4 g (4000 mg) per day, but occasional use of ibuprofen may be acceptable.</li> </ul>
Signs of <b>heart problems</b> such as chest pain or fast or uneven heartbeat.	rare	Contact your oncologist <i>immediately</i> if this happens to you.
Diarrhea may commonly occur.	common	If diarrhea is a problem:  • Drink plenty of fluids.  • Eat and drink often in small amounts.  Avoid high fibre foods as outlined in Food Ideas to Help with Diarrhea During Chemotherapy.*
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	<ul> <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>Make a mouthwash with ½ teaspoon baking soda or salt in 1 cup warm water and rinse several times a day.</li> <li>Try the ideas in Food Ideas for a Sore Mouth During Chemotherapy.*</li> </ul>

OTHER SIDE EFFECTS	How common is it?	MANAGEMENT
Hair loss may occur. If you lose hair, it will grow back once you stop treatment. Colour and texture may change.	very uncommon	If hair loss is a problem, refer to For the Patient: Hair Loss Due to Chemotherapy.*
Changes in hearing may occur.	common	Contact your doctor if you have any concerns in your hearing.
<b>Tiredness</b> and lack of energy may occur.	common	Do not drive a car or operate machinery if you are feeling tired.  Try the ideas in <i>Your Bank to Energy Savings: Helping People with Cancer Handle Fatigue</i> .*
Your <b>skin may sunburn</b> more easily than usual.		Refer to Your Medication Sun Sensitivity and Sunscreens* or the BC Health Guide for more information.
		After sun exposure, if you have a severe sunburn or skin reaction such as itching, rash, or swelling, contact your doctor.

## **INSTRUCTIONS FOR THE PATIENT**

## What other drugs can interact with cisplatin, carboplatin, and fluorouracil?

- Other drugs such as phenytoin (DILANTIN®), warfarin (COUMADIN®) or some drugs that affect the kidneys may interact with HNAVFUP.
- Check with your doctor or pharmacist before you start taking any new prescriptions or non-prescription products.

## THE FOLLOWING INFORMATION IS VERY IMPORTANT

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

- 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 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.
- 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, difficulty breathing, swelling of ankles or fainting.

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

- Signs of **kidney problems** such as lower back or side pain, swelling of feet or lower legs.
- Ringing in your ears or hearing problems.

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

- 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.
- Signs of anemia such as unusual tiredness or weakness.
- Numbness or tingling in feet or hands or painful leg cramps.

If you experience symptoms or changes in your body that have not been described above but worry you, or in any symptoms are severe, contact:		
at telephone		
number:		

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