For the Patient: HNNAVP
Other Names: Treatment of Recurrent and/or Metastatic Nasopharyngeal Cancer with Cisplatin
HN = Head and Neck
N = Nasopharyngeal
AV = Advanced
P = CisPlatin

ABOUT THIS MEDICATION

What is this drug used for?
• Cisplatin is an intravenous anticancer medication used for many types of cancer.

How does this drug work?
• Cisplatin interferes with the genetic material, DNA and RNA, of cancer cells to prevent their growth. The result is the cancer cell dies.

INTENDED BENEFITS
• This therapy is being given to destroy and/or prevent the growth of new cancer cells in your body.
• This treatment may improve your current symptoms, and delay or prevent the onset of new symptoms.
• This treatment is expected to delay the progression of your cancer.

TREATMENT SUMMARY

How are these drugs given?
• Cisplatin is given intravenously every week continuously or weekly for 2 weeks out of every 3 weeks. This is repeated until it no longer controls your cancer or you have intolerable side effects.
• Each cycle is every 14 days or 21 days.

What will happen when I get my drugs?
• A blood test is done within one month prior to starting your first treatment.
• A blood test is done before each treatment. You will be given lab requisitions for these tests. 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 medication (filled at your regular pharmacy) that you bring in each time for your treatment. Your nurse will tell you when to take the anti-nausea medication. It is easier to prevent nausea than to treat it once it has occurred, so follow the suggestions given to you.
• To prevent nausea, be well-hydrated and eat small meals frequently. Refer to the pamphlet on “Food Choices to Help Control Nausea”.

BC Cancer Agency Protocol Summary (Patient Version) HNNAVP
Developed: 1 May 2014
Treatment Protocol

Cycle 1:

<table>
<thead>
<tr>
<th>Day 1</th>
<th>Day 2</th>
<th>Day 3</th>
<th>Day 4</th>
<th>Day 5</th>
<th>Day 6</th>
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<td>Day 12</td>
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<td>Day 14</td>
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<td>no chemo</td>
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<td>Day 1</td>
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<tr>
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<td>chemo or</td>
<td>Day 1:</td>
<td>start</td>
<td>cycle 2</td>
<td></td>
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</tr>
</tbody>
</table>

CHEMOTHERAPY SIDE EFFECTS AND MANAGEMENT

Are there any risks?
- Unexpected and unlikely side effects can occur with any drug treatment. The ones listed in the following tables 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.

<table>
<thead>
<tr>
<th>SERIOUS SIDE EFFECTS</th>
<th>HOW COMMON IS IT?</th>
<th>MANAGEMENT</th>
</tr>
</thead>
</table>
| When your white blood cells are low, you are at greater risk of having an infection. White blood cells protect your body by fighting bacteria (germs) that cause infection. | common | 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 infection such as fever (over 38°C or 100°F by an oral thermometer), chills, cough, or burning when you pass urine. |
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| When your platelets are low, you are at greater risk of bruising or bleeding more easily than usual. | common | 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.  
• Many natural health products may increase your risk of bleeding.  
• Do not stop taking any medication prescribed by your doctor.  
• For minor pain, try acetaminophen (TYLENOL®) first, but occasional use of ibuprofen is acceptable. |
| Chest pain or signs of a stroke may rarely occur | rare | Go to your nearest emergency department if you should experience any chest pain or signs of a stroke. |

<table>
<thead>
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| Nausea and vomiting may occur after your treatment and may last for up to 24 hours. Nausea may last longer for some patients (ie. Delayed nausea and vomiting) | 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 fluids  
• Eat and drink often in small amounts  
• Try the ideas in Food Choices to Help Control Nausea.  
Your doctor may manage delayed nausea and vomiting differently. Be sure to let your doctor know if you experience this. |
<p>| Changes in hearing may occur. | common | Contact your doctor if you notice ringing in your ears or any changes in your hearing. |</p>
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</table>
| **Diarrhea** may occur after your treatment. Diarrhea can lead to dehydration. | uncommon | To help manage diarrhea: 
- Drink plenty of fluids 
- Eat and drink often in small amounts 
- Avoid high fibre foods as outlined in Food Ideas to Help with Diarrhea |
| **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. If your gums bleed, use gauze instead of a brush. Use baking soda instead of toothpaste. 
- Make a mouthwash with ½ teaspoonful baking soda or salt in 1 cup warm water and rinse several times a day. 
- Try soft bland foods like puddings, milkshakes and cream soups. 
- Avoid spicy, crunchy or acidic food and very hot or cold foods. 
- Try the ideas in Food Ideas to Help with Sore Mouth |
| **Hair loss** may occur. | uncommon | - Use a gentle shampoo and soft brush 
- Care should be taken with use of 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. |

**What other drugs can interact with cisplatin?**
- Antibiotics given by vein (e.g., tobramycin, vancomycin), furosemide (LASIX®), phenytoin (DILANTIN®), and pyridoxine (vitamin B6) may interact with cisplatin.
- Check with your doctor or pharmacist before you start taking any new prescriptions or non-prescription products.
Other important things to know:

- Cisplatin can cause changes in kidney function. It is important to be well-hydrated before and after your treatment. Drink 2 to 3 cups of water on the morning of your treatment. Drink 8 to 12 cups of liquids after your treatment. This helps prevent kidney problems.
- Your doctor may ask you to take a hearing test before and at various times during your treatment with cisplatin. This helps to detect hearing problems.

**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 38°C or 100°F by oral thermometer), shaking chills, severe sore throat, productive cough (coughing up thick or green sputum), pain or burning when you pass urine.
- Signs of an **allergic reaction** (rare) soon after a treatment including dizziness, fast heartbeat, face swelling or breathing problems.
- 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 **bleeding problems** such as black, tarry stools, blood in urine, pinpoint red spots on skin, extensive bruising.
- 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.
- Redness, swelling, pain or sores where the needle was placed

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

- Signs of kidney problems such as lower back pain or side pain, swelling of feet or lower legs, numbness or tingling in feet or hands, blood in urine, or cloudy urine.
- Signs of liver problems such as yellow eyes or skin, white or clay-coloured stools.
- Uncontrolled nausea, vomiting or diarrhea

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

- Easy bruising or bleeding
- Redness, swelling, pain or sores on your lips, tongue, mouth or throat
- Signs of anemia such as unusual tiredness or weakness
- Skin rash or itching
- 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: __________________________