

For the Patient: HNSAVFAC

Palliative Therapy for Advanced Salivary Gland Cancers using Fluorouracil, Doxorubicin, and Cyclophosphamide.

- HN = Head and Neck
- **S** = **S**alivary Gland
- AV = Advanced
- F = Fluorouracil
- A = Adriamycin® (brand name for Doxorubicin)
- **C** = **C**yclophosphamide

ABOUT THIS MEDICATION

What are these drugs used for?

- 5-Fluorouracil (flure-oh-yoor'-a-sill) is an anticancer medication used to treat many types of cancer. It is a clear liquid that is injected into a vein.
- Doxorubicin (dox-oh-ROO-biss-in) is an anticancer medication used to treat many types of cancers. It is a red liquid that is injected into a vein.
- Cyclophosphamide (sigh-kloe-FOSS-fa-mide) is an anticancer medication used to treat many types of cancer. It is a clear liquid that is injected into a vein.

How do these drugs work?

• 5-Fluorouracil, doxorubicin, and cyclophosphamide interfere 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 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 meant to delay the progression of your cancer.

HNSAVFAC TREATMENT SUMMARY

How are these drugs given?

• 5-Fluorouracil, doxorubicin, and cyclophosphamide are all given intravenously (through a vein) on the first day of each cycle. One cycle is 21 days. This may be repeated for 6 to 8 cycles.

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 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 prescriptions to prevent nausea; please have these filled at your regular pharmacy and bring them in with you <u>each</u> time for 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 please follow the suggestions given to you.

Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
5-fluorouracil doxorubicin cyclophosphamide	no chemo	no chemo	no chemo	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 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
start cycle 2						

HNSAVFAC Treatment Protocol

This 21-day cycle will repeat 6 to 8 more times.

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
Your white blood cells may decrease 7 to 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	 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 <i>immediately</i> 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.

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	 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 like 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 by your doctor (e.g. ASA for your heart). For minor pain, try acetaminophen (TYLENOL®) first, to a maximum of 4 g (4000 mg) per day, but occasional use of ibuprofen may be acceptable.
Signs of heart problems such as chest pain or fast or uneven heartbeat.	rare	Contact your oncologist <i>immediately</i> if this happens to you.
Doxorubicin burns if it leaks under the skin.	Very rare	Tell your nurse or doctor <i>immediately</i> if you feel burning, stinging or any other change while the drug is being given.

OTHER SIDE EFFECTS	HOW COMMON IS IT?	MANAGEMENT
Nausea and vomiting may occur after your treatment and may last for 24 hours.	common	 You may 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
Increased tears during treatment, with or without	uncommon	 If this occurs, apply ice packs to eyes before, during and for 30 minutes after
itching and burning.		fluorouracil to minimize this side effect.

OTHER SIDE EFFECTS	HOW COMMON IS IT?	MANAGEMENT
Nasal congestion may occur during administration of cyclophosphamide. You may experience runny eyes and nose, sinus congestion and sneezing during or immediately after the infusion.	uncommon	For persistent nasal congestion a decongestant such as pseudoephedrine (e.g., SUDAFED®) or a decongestant/antihistamine such as pseudoephedrine/triprolidine (e.g., ACTIFED®) can be used to relieve symptoms.
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 toothbrush. Use baking soda instead of toothpaste. Make a mouthwash with ½ teaspoon baking soda or salt in 1 cup warm water and rinse several times a day. Try the ideas in Food Ideas to Try With a Sore Mouth
Hair loss may begin within a few days or weeks of treatment. You may become totally bald. Your scalp may feel tender. You may lose hair on your face and body. Your hair will grow back once your treatments are over and sometimes between treatments. Colour and texture may change.	very common	 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 expected 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.
Loss of appetite and weight loss can occur and may persist long after discontinuation of cyclophosphamide.	common	Try ideas in <u>Healthy Eating Using High</u> <u>Energy High Protein Foods</u> and <u>Food</u> <u>Ideas to Help With Poor Appetite</u>
Your urine may be pink or reddish for 1-2 days after your treatment with doxorubicin.	common	This is expected as doxorubicin is red and is passed in your urine.

OTHER SIDE EFFECTS	HOW COMMON IS IT?	MANAGEMENT
Diarrhea may occur.	uncommon	 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 Manage Diarrhea
Your skin may darken in some areas such as your nails, soles or palms.	uncommon	This will slowly return to normal once you stop treatment with doxorubicin.
Your skin may sunburn easily after treatment with 5-fluorouracil.	rare	 To help prevent sunburn: Avoid direct sunlight. Wear a hat, long sleeves and long pants or skirt outside on sunny days. Apply a sunscreen with an SPF (sun protection factor) of at least 30. Refer to <u>Sun sensitivity and sunscreens</u> for more information.
Pain or tenderness may occur where the needle was placed.	rare	 Tell your nurse or doctor <i>immediately</i> if you feel burning, stinging, or any other change while the drug is being given. Apply cool compresses or soak in cool water for 15-20 minutes several times a day.

INSTRUCTIONS FOR THE PATIENT

• It is important for you to **drink plenty of water** on the day of your treatment and for a few days following your treatment. This will prevent kidney problems.

What other drugs can interact with 5-fluorouracil, doxorubicin, and cyclophosphamide?

- Phenytoin, fosphenytoin, and warfarin may *interact* with 5-fluorouracil.
- Digoxin or cyclosporine may *interact* with doxorubicin.
- Allopurinol, amiodarone, digoxin, hydrochlorothiazide, indomethacin, phenobarbital, phenytoin, or warfarin may *interact* with cyclophosphamide.

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 or natural health products.

THE FOLLOWING INFORMATION IS VERY IMPORTANT

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

- Signs of an **allergic reaction** (rare) soon after a treatment including dizziness, fast heartbeat, face swelling or breathing problems.
- 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; pinpoint red spots on skin, extensive bruising.
- Signs of **heart of lung problems** such as fast or uneven heartbeat, chest pain, chest pressure, shortness of breath, or difficulty in breathing, swelling of ankles, or fainting.
- Sudden **abdominal pain** or tenderness.

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

- **Painful hand-foot skin reaction** such as painful redness, peeling tingling, numbness, swelling, or blistering of the palms of your hands and/or the bottoms of your feet.
- Uncontrolled nausea, vomiting, or diarrhea.
- Signs of **anemia** such as unusual tiredness or weakness.
- Severe skin irritation.

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

- Painless hand-foot skin reaction such as redness, peeling, tingling, numbness, swelling, or blistering of the palms of your hands and/or bottoms of your feet.
- Easy bruising or minor bleeding.
- Redness, swelling, pain, or sores where the needle was placed.
- Redness, swelling, pain, or sores on your lips, tongue, mouth, or throat.
- Heartburn; mild to moderate abdominal or stomach pain.
- Dizziness or trouble walking.
- Eye irritation or changes in eyesight.

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:___