

For the Patient: LUSCPERT (Carboplatin Option)

Other Names: Treatment of Limited Stage Small Cell Lung Cancer (SCLC) using Platinum and Etoposide with Radiation Therapy

LU = LUng SC = Small Cell

PE = CarboPlatin, Etoposide

RT = Radiation Therapy

ABOUT THIS MEDICATION

What are these drugs used for?

LUSCPE is an intravenous (through the vein) drug treatment given with radiation therapy (RT) for small cell lung cancer (SCLC). The goal of this treatment is to help control or shrink the cancer and some of the symptoms caused by it.

How do these drugs work?

Carboplatin (KAR-boe-plat-in) and etoposide (ee-TOP-aw-side) are anticancer drugs that work by interfering with the genetic material of replicating cells and preventing an increase in the number of cancer cells.

Carboplatin is also a radio-sensitizer. This means that when carboplatin is given with radiation, the treatment is more effective.

INTENDED BENEFITS

This treatment is being given to destroy and/or limit the growth of cancer cells in your body. This treatment can help with controlling some of the symptoms the cancer may be causing, such as pain, coughing, wheezing, difficulty swallowing, weight loss and fatigue. It can also delay or prevent new symptoms from starting. Research has shown that patients may live longer after receiving this chemotherapy treatment.

LUSCPERT TREATMENT SUMMARY

How are these drugs given?

- Your treatment plan consists of 4 to 6 chemotherapy "cycles". Each cycle lasts 3 or 4 weeks (21 or 28 days).
- For each cycle, you will have the two medications given to you intravenously (through the vein) on Day 1, and one medication given to you intravenously on Days 2 and 3.
 - <u>Day 1</u>:
 - Carboplatin is given first, and is given intravenously over approximately half-anhour (30 minutes).
 - Etoposide is given second, and is given intravenously over approximately one hour (30-60 minutes).
 - Days 2 and 3:
 - Only Etoposide is given on these days and is given intravenously over approximately one hour (30-60 minutes)

Developed: 1 May 2010 Revised: 1 Apr 2023 For cycles given concurrently (together) with radiation therapy:

- Radiation usually starts with the second cycle of chemotherapy, but your oncologist will decide what the best timing for you will be.
- Radiation is usually given over a period of approximately three weeks; once per day, during the week (Mon-Fri), with weekends off.
- For the first three days of your scheduled radiation, you will receive both carboplatin and etoposide chemotherapy and your radiation will be given after your daily chemotherapy treatments are complete.

What will happen when I get my drugs?

- A blood test is done within one month of starting treatment.
- A blood test is also done before Day 1 of each cycle.
- The dose and timing of your chemotherapy may be changed based on your blood test results and/or other side effects.
- Your very 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 pharmacy). Please bring your anti-nausea medications with you for each treatment. Your nurse will tell you when to take the anti-nausea medication(s). You may also need to take your anti-nausea drugs at home after therapy. It is easier to prevent nausea than to treat it once it happens, so follow directions closely.

LUSCPERT TREATMENT PROTOCOL

No

chemo

Start Date: __

No

chemo

Cycle 1:						
Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
Carboplatin	Etoposide	Etoposide	No	No	No	No
& Etoposide			chemo	chemo	chemo	chemo
Day 8	Day 9	Day 10	Day 11	Day 12	Day 13	Day 14
No	No	No	No	No	No	No
chemo	chemo	chemo	chemo	chemo	chemo	chemo
Day 15	Day 16	Day 17	Day 18	Day 19	Day 20	Day 21

No

chemo

This 21-day cycle will repeat 3 to 5 more times.

No

chemo

No

chemo

No

chemo

No

chemo

Radiation will be given from Monday to Friday over approximately 3 weeks during one cycle, usually with cycle #2. You will still receive 3 days of chemotherapy during this cycle. At the end of this cycle, you may be given one extra week off (28-day cycle) - this will be up to your oncologist

Developed: 1 May 2010 Revised: 1 Apr 2023

INSTRUCTIONS

What other drugs can interact with LUSCPERT?

- Other drugs such as phenytoin (Dilantin®), atovaquone (MEPRON®), warfarin (Coumadin®), glucosamine and St John's Wort may interact with LUSCPERT. Tell your doctor if you are taking these or other drugs as you may need extra blood tests, your dose may need to be changed or your treatment may need to be held for a few days.
- Check with your doctor or pharmacist before you start taking any new prescription or nonprescription drugs.

Other important things to know:

- The drinking of alcohol (in small amounts) does not appear to affect the safety or usefulness
 of this treatment.
- This treatment may cause sterility in men and menopause in women. If you plan to have children, discuss this with your doctor before starting treatment.
- This treatment may damage sperm and may cause harm to the baby if used during pregnancy. It is best to use <u>birth control</u> while you are undergoing treatment. Tell your doctor right away if you or your partner becomes pregnant. Do not breast feed during treatment.
- Tell all doctors or dentists you see that you being treated with carboplatin and etoposide before you receive treatment of any form.

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.

SIDE EFFECTS	MANAGEMENT
Allergic reactions may rarely occur. Signs of an allergic reaction may include: chest discomfort, shortness of breath, light headedness and flushing, rash, itching, dizziness, swelling or breathing problems. This can occur during or immediately following administration of etoposide or carboplatin, or several hours after receiving carboplatin.	Tell your nurse if this happens while you are receiving carboplatin or etoposide, or contact your oncologist <i>immediately</i> if this happens after you leave the clinic.
Pain or tenderness may occur where the needle was placed in your vein.	Apply cool compresses or soak in cool water for 15-20 minutes several times a day.
Etoposide burns if it leaks under the skin.	Tell your nurse <i>immediately</i> if you feel burning, stinging, or any other change while the drug is being given.

BC Cancer Protocol Summary (Patient Version) LUSCPERT (carboplatin option) Developed: 1 May 2010 Revised: 1 Apr 2023

SIDE EFFECTS	MANAGEMENT	
Nausea and vomiting may occur after your treatment and may last for up to 24 hours. If you are vomiting and it is not controlled, you can quickly become dehydrated.	You will be given a prescription for antinausea drug(s) to take before your treatment and 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 <i>Practical Tips to Manage Nausea.*</i> Tell your healthcare team if nausea or vomiting continues or is not controlled with your antinausea drug(s).	
Diarrhea may occur. If you have diarrhea and it is not controlled, you can quickly become dehydrated.	If diarrhea is a problem: Drink plenty of fluids. Eat and drink often in small amounts. Avoid high fibre foods as outlined in Food Choices to Help Manage Diarrhea.* Tell your healthcare team if you have diarrhea for more than 24 hours.	
Constipation may occur.	 Exercise if you can. Drink plenty of fluids. Try the ideas in Food Choices to Manage Constipation.* 	
Your white blood cells may decrease 7-14 days after your treatment. They usually return to normal 3 weeks after your last 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.	 To help prevent infection: Wash your hands often and always after using the bathroom. Avoid crowds and people who are sick. Stop taking etoposide and call your healthcare team <i>immediately</i> at the first sign of an infection such as fever (over 38°C or 100°F by an oral thermometer), chills, cough, or burning when you pass urine. 	

SIDE EFFECTS	MANAGEMENT
Your platelets may decrease during or after your treatment They will return to normal after your last treatment. Platelets help to make your blood clot when you hurt yourself. You may bruise or bleed more easily than usual.	 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. Do not stop taking any medication that has been prescribed by your doctor (e.g., ASA for your heart). For minor pain, try acetaminophen (e.g., TYLENOL®) first, to a maximum of 4 g (4000 mg) per day
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.	 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 ¼ teaspoon baking soda AND ¼ teaspoon salt in 1 cup warm water and rinse several times a day. Try the ideas in Food Ideas to Try with a Sore Mouth.*
Loss of appetite and weight loss may occur	Try the ideas in Food Ideas to Help with Decreased Appetite.*
Taste alteration may occur	Try the ideas in "Food Ideas to Cope with Taste and Smell Changes".
Tiredness or lack of energy may occur.	 Do not drive a car or operate machinery if you are feeling tired. Try the ideas in Fatigue/Tiredness – Patient Handout.*
Dizziness or feeling faint may occur during administration of etoposide.	 Tell your nurse or doctor <i>immediately</i>. Lie down or sit with your feet elevated.

SIDE EFFECTS	MANAGEMENT
Hair loss can occur and may begin within a few days or weeks of treatment. Your hair may thin or 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 when your hair grows back.	Refer to Resources for Hair Loss and Appearance Changes – Patient Handout.* You may also want to: 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 broadbrimmed hat and glasses.

RADIATION SIDE EFFECTS AND MANAGEMENT

SIDE EFFECTS	MANAGEMENT
Tiredness or lack of energy may occur.	 Do not drive a car or operate machinery if you are feeling tired. Try the ideas in "Your Bank of Energy Savings: How People with Cancer can Handle Fatigue".
Since radiation must pass through your skin, skin irritation may occur while receiving radiotherapy. Skin may feel warm and sensitive and color may change.	 Bathe using lukewarm water and mild, unscented soap. Pat skin dry with a soft towel. Wear loose, comfortable clothing. Protect skin from direct sunlight and wind. Avoid deodorants, perfume, alcohol, astringents and adhesives.
Cough or shortness of breath may occur, as radiation lowers the level of the lung's <i>surfactant</i> , a substance that helps the lungs expand.	 Drink plenty of fluids throughout the day If you are experiencing cough and are also feverish or unwell, it's important to call your doctor.
You may experience a sore throat or difficulty swallowing.	 Try eating smaller amounts of food at more frequent intervals. Avoid highly seasoned foods, acidic foods, or foods that are very hot or very cold. Drink plenty of fluids throughout the day. Try ideas Easy to Chew Recipes and Soft, Moist Food Ideas
Hair loss will occur on the area of skin being treated.	Hair usually grows back within a few months. Sometimes, as it grows back, it can become patchy.

^{*} Please ask a member of your healthcare team for a copy

Developed: 1 May 2010 Revised: 1 Apr 2023

<u>SEE YOUR HEALTHCARE TEAM OR GET EMERGENCY HELP IMMEDIATELY IF YOU HAVE:</u>

- Signs of an **infection** such as fever (over 38°C or 100°F 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 or pinpoint red spots on skin, or extensive bruising.
- Signs of an **allergic reaction** (rare) soon after a treatment including dizziness, fast heart beat, face swelling or breathing problems.

<u>SEE YOUR HEALTHCARE TEAM AS SOON AS POSSIBLE (DURING OFFICE HOURS)</u> <u>IF YOU HAVE:</u>

- Signs of **liver problems** such as yellow eyes or skin, white or clay-colored stools.
- Signs of kidney problems such as lower back or side pain, swelling of feet or lower legs.
- Signs of **anemia** such as unusual tiredness or weakness.
- Changes in eyesight.
- Ringing in your ears or hearing problems.
- Skin rash or itching.
- Stomach pain not controlled by antacids or acetaminophen.

CHECK WITH YOUR HEALTHCARE TEAM IF ANY OF THE FOLLOWING CONTINUE TO BOTHER YOU:

- Easy bruising or bleeding.
- Uncontrolled nausea, vomiting, constipation or diarrhea.
- Redness, swelling, pain or sores where the needle was place or along the arm.
- Redness, swelling, pain or sores on your lips, tongue, mouth or throat.
- 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

BC Cancer Protocol Summary (Patient Version) LU Developed: 1 May 2010 Revised: 1 Apr 2023