

# For the Patient: LYGEMOXPEG

Other Names: Treatment of Newly Diagonised or Relapsed/Refractory NK or T-cell lymphoma using Gemcitabine, Oxaliplatin and Pegaspargase

- LY LYmphoma GEM GEMcitabine OX OXaliplatin
- PEG PEGaspargase

### ABOUT THIS MEDICATION

#### What are these drugs used for?

• Gemcitabine (jem-SITE-a-been), oxaliplatin (OX-ah-lee-plat-in) and pegaspargase (peg as' par jase) are drugs used to treat natural killer (NK) or T-cell lymphomas.

#### How do these drugs work?

- Gemcitabine and oxaliplatin work by interfering with dividing cells and preventing an increase in the number of cancer cells.
- Pegaspargase depletes cancer cells of nutrients and kills them.

#### INTENDED BENEFITS

• This treatment is being given to slow down the growth of cancer cells in your body. This treatment can help with controlling some of the symptoms the cancer may be causing and may delay or prevent new symptoms from starting.

#### TREATMENT SUMMARY

#### How are these drugs given?

- Gemcitabine and oxaliplatin are given directly into the vein (IV).
- Pegaspargase is usually given into the vein (IV), although it may also be given as an injection into the muscle (IM).
- You will receive gemcitabine once a week for 2 weeks (Days 1 and 8). You will receive oxaliplatin and pegaspargase once every 3 weeks (Day 1)
- This 3 week cycle or 21 day period of time is called a "cycle". The cycles are repeated up to 6 times.
- Treatment will last **about 5 hours** on Day 1 when you receive gemcitabine, oxaliplatin and pegaspargase, and about **45 minutes** on Day 8 when you receive gemcitabine.
- Your first treatment will probably take longer, as the nurse will review information on the chemotherapy drugs with you.

#### What will happen when I get my drugs?

• The day before each scheduled chemotherapy treatment, you will have a **blood test.** The dose and timing of your chemotherapy may be changed based on your blood counts and/or other side effects.

- You will be given medication to help prevent an allergic reaction to pegaspargase. This is usually given by the nurse, just before your treatment.
- Your nurse will monitor your blood pressure and heart rate before and during the pegaspargase infusion and will watch you for 1 hour after the end of the infusion.

### SIDE EFFECTS AND WHAT TO DO ABOUT THEM

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.

Your doctor will review the risks of treatment and possible side effects with you before starting treatment. The nurse will review possible side effects of the drugs and how to manage those side effects with you on the day you receive your first treatment.

SERIOUS SIDE EFFECTS DURING TREATMENT	MANAGEMENT
Tell your nurse if you feel like you have <b>difficulty breathing or swallowing</b> during or immediately after your oxaliplatin infusion. This may occur rarely.	<ul> <li>These symptoms will disappear in a few hours, and may not require treatment.</li> <li>If you have these symptoms with a 2-hour infusion, your next treatment may be given over 6 hours.</li> </ul>
Allergic reactions may sometimes occur. Signs of an allergic reaction are dizziness, feeling faint, confusion, flushing, rash, itching, shortness of breath, and wheezing. This may occur immediately or several hours after receiving the drugs. It can occur after the first dose, or after many doses.	Tell your nurse if this happens while you are receiving the drugs or contact your doctor immediately if this happens after you leave the clinic.
Oxaliplatin will <b>burn</b> if it leaks under the skin.	Tell your nurse or doctor immediately if you feel burning, stinging, or any other change while the drug is being given.
<b>Nausea and vomiting</b> may occur after your treatment and may last for 24- 48 hours. Some people have little or no nausea.	<ul> <li>You may be given a prescription for an 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.</li> <li>Drink plenty of liquids.</li> <li>Eat and drink often in small amounts.</li> <li>Try the ideas in <i>Practical Tips to Manage Nausea</i>*</li> </ul>

SERIOUS SIDE EFFECTS DURING TREATMENT	MANAGEMENT
You may feel <b>tingling or a loss of feeling in</b> <b>your hands, feet, nose, or throat.</b> They may be made worse by exposure to <b>cold</b> . This is very common after oxaliplatin treatment. These problems often disappear after a few hours or days.	<ul> <li>Avoid cold air if possible.</li> <li>Protect yourself from the cold, which can cause or worsen these symptoms. Wear gloves, socks, and something that covers your mouth and nose when outside in cold weather.</li> <li>Do not drink cold beverages or eat cold food for a few days after treatment.</li> <li>If symptoms continue for more than a week, or interfere with how your hands work, talk to your doctor.</li> <li>Try the ideas in <i>Coping With/Preventing Oxaliplatin Cold Dysesthesias*.</i></li> </ul>
<b>Diarrhea</b> may occur during your treatment. This is very common.	<ul> <li>To help diarrhea:</li> <li>Drink plenty of fluids</li> <li>Eat and drink often in small amounts</li> <li>Eat low fibre foods &amp; avoid high fibre foods as outlined in <i>Food Choices to Help Manage Diarrhea*</i></li> <li>If you have an increase of less than 4 stools per day more than normal, or a mild increase in ostomy output, start the following:</li> <li>Loperamide (IMODIUM®) 2 mg, take 2 tablets (4mg) to start, followed by 1 tablet (2 mg) every 4 hours, or after each unformed stool to a maximum of 8 tablets (16 mg) daily, unless otherwise directed by a physician</li> </ul>
Your white blood cells will decrease after your treatment and usually return to normal 2 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.	<ul> <li>To help prevent infection:</li> <li>Wash your hands often and always after using the bathroom.</li> <li>Take care of your skin and mouth.</li> <li>Call your doctor <u>immediately</u> 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>

OTHER SIDE EFFECTS DURING TREATMENT	MANAGEMENT
Pain or tenderness may occur where the needle was placed.	<ul> <li>Apply warm compresses or soak in warm water for 15-20 mins. several times a day.</li> </ul>
<b>Fever</b> may occur shortly after treatment with oxaliplatin. Fever should last no more than 24 hours.	<ul> <li>Take acetaminophen (e.g. TYLENOL®) every 3 – 4 hours.</li> <li>Fever which occurs more than 48 hours after treatment may be the sign of an infection. See "white blood cells" above.</li> </ul>
Your <b>platelets</b> may decrease during or after your treatment. They will return to normal after your last treatment. This is common. Platelets help to make your blood clot when you hurt yourself. <b>You may bruise or bleed</b> <b>more easily than usual.</b>	<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, but occasional use of ibuprofen may be acceptable.</li> </ul>
<b>Skin rash</b> may occur after treatment. It is usually mild and is found on the arms, legs, chest, back or stomach. It may or may not be itchy	<ul> <li>To help itching:</li> <li>You can use calamine lotion or hydrocortisone cream 0.5% sparingly 3-4 times daily</li> <li>If very irritating, call your doctor during office hours.</li> <li>Otherwise mention it at your next visit.</li> </ul>
Loss of appetite is uncommon but may occur and may persist long after discontinuation of fluorouracil.	Try the ideas in <i>Food Ideas to Help with</i> Decreased Appetite.*
Tiredness and lack of energy may occur.	<ul> <li>Do not drive a car or operate machinery if you are feeling tired.</li> <li>Try the ideas in the handout titled <i>Fatigue/Tiredness*</i></li> </ul>
Hair loss sometimes occurs with gemcitabine and is rare with oxaliplatin and pegaspargase. If you experience hair loss, your hair will grow back once you stop treatment. Colour and texture may change.	<ul> <li>Use a gentle shampoo and soft brush.</li> <li>Care should be taken with use of hair spray, bleaches, dyes and perms.</li> <li>If hair loss is a problem, refer to <i>Resources for Hair Loss and Appearance Changes*.</i></li> </ul>

OTHER SIDE EFFECTS DURING TREATMENT	MANAGEMENT
<b>Abnormal heart rhythm</b> (QT prolongation) rarely occurs with oxaliplatin.	Minimize your risk of abnormal heart rhythm by:
	<ul> <li>Always checking with your pharmacist and doctor about drug interactions when starting a new medication, herbal product, or supplement.</li> </ul>
	<ul> <li>Tell your doctor immediately or get emergency help if your heart is beating irregularly or fast, or if you feel faint, lightheaded, or dizzy.</li> </ul>

\*Please ask your chemotherapy nurse or pharmacist for a copy.

# **INSTRUCTIONS FOR THE PATIENT**

- Tell your doctor if you have ever had an unusual or **allergic reaction** to the following drugs before starting this treatment:
  - 1. oxaliplatin, cisplatin (PLATINOL®) or carboplatin (PARAPLATIN®).
  - 2. gemcitabine
  - 3. pegaspargase or asparaginase
- **Alcohol** may increase the increase the risk of liver problems with pegaspargase and should be avoided.
- Gemcitabine, oxaliplatin and pegaspargase may damage sperm and may harm the baby if used during pregnancy. It is best to use **birth control** while being treated with these drugs. Tell your doctor right away if you or your partner becomes pregnant. Do not breast feed during treatment.
- Tell doctors, dentists and other health professionals that you are being treated with gemcitabine, oxaliplatin, and pegaspargase before you receive any treatment from them.

#### **Medication Interactions:**

• Some drugs such as warfarin (COUMADIN®), may **interact** with gemcitabine and oxaliplatin. Tell your doctor if you are taking this or any other drugs as you may need extra blood test or your dose may need to be changed. Check with your doctor or pharmacist before you start taking any new drugs

## 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 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); 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 or lung problems** such as fast or uneven heartbeat, chest pain, chest pressure, shortness of breath, or difficulty in breathing, swelling of ankles, or fainting.
- Severe abdominal pain or tenderness.
- Seizures or loss of consciousness with or without confusion, headache, or changes in eyesight.
- Uncontrolled nausea, vomiting, or diarrhea.

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

- Dizziness, lightheadedness, or feeling of faintness.
- Numbness or tingling in feet or hands.
- Signs of **anemia** such as unusual tiredness or weakness.
- Signs of liver problems such as yellow eyes or skin, white or clay-coloured stools.
- Severe skin irritation.
- Signs of **kidney problems** such as lower back or side pain, swelling of feet or lower legs, numbness or tingling in feet or hands, blood in urine or cloudy urine

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

- Easy bruising or minor bleeding.
- For diabetics: uncontrolled blood sugars.
- Tingling or a loss of feeling in your hands, feet, nose or throat
- Redness, swelling, pain, or sores where the needle was placed.
- 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