

For the Patient: Doxorubicin, pegylated liposomal

Other names: CAELYX®

 Pegylated liposomal doxorubicin (dox-oh-ROO-biss-in) is a drug that is used to treat many types of cancers. Pegylated liposomal doxorubicin is a red liquid that is injected into a vein.

- Tell your doctor if you have ever had an unusual or allergic reaction to other chemotherapy drugs such as doxorubicin, daunorubicin, epirubicin, mitomycin or mitoxantrone before treatment begins.
- A blood test may be taken before each treatment. The dose and timing of your treatment may be changed based on the test results and/or other side effects.
- Other drugs such as digoxin (LANOXIN®) and cyclosporine (NEORAL®, SANDIMMUNE®) may interact with doxorubicin. 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.
- The drinking of alcohol (in small amounts) does not appear to affect the safety or usefulness of pegylated liposomal doxorubicin.
- Pegylated liposomal doxorubicin may cause **sterility** in men and **menopause** in women. If you plan to have children, discuss this with your doctor before being treated with pegylated liposomal doxorubicin.
- Pegylated liposomal doxorubicin may damage sperm and may harm the baby if used during pregnancy. It is best to use **birth control** while being treated with pegylated liposomal doxorubicin. Tell your doctor right away if you or your partner becomes pregnant. Do not breastfeed during treatment.
- **Tell** your doctor, dentists, and other health professionals that you are being treated with pegylated liposomal doxorubicin before you receive any treatment from them.

Side effects are listed in the following table in the order in which they may occur. Tips to help manage the side effects are included.

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SIDE EFFECTS	MANAGEMENT
Infusion reactions may rarely occur. Early signs of an infusion reaction are shortness of breath, dizziness and sweating. This can occur immediately after you	Tell your nurse or doctor immediately if you have a reaction during treatment. • Your treatment may be given more slowly. • You may be given other drugs to treat
begin to receive the drug and usually only with the first dose. Pegylated liposomal doxorubicin may	the reaction. Tell your nurse or doctor <i>immediately</i> if
irritate the vein.	there is any discomfort while the drug is being given.
Pain or tenderness may occur where the needle was placed.	Apply cool compresses or soak in cool water for 15-20 minutes several times a day.
Nausea and vomiting may occur after your treatment. Most people have little or no nausea. If you are vomiting and it is not controlled, you can quickly become dehydrated.	You may be given a prescription for antinausea drugs to take before your 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 <i>Practical Tips to Manage Nausea.*</i> Tell your healthcare team if nausea or vomiting continues or is not controlled with
Oldin made as many assum	your antinausea drug(s).
Skin rashes may occur.	To help itching: • You can use calamine lotion.
	If very irritating, call your doctor during office hours.
	Otherwise make sure to mention it at your next visit.
Diarrhea may occur. If you have diarrhea	If diarrhea is a problem:
and it is not controlled, you can quickly	Drink plenty of liquids.
become dehydrated.	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.

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SIDE EFFECTS	MANAGEMENT
Constipation may occur.	To help constipation: • Exercise if you can. • Drink plenty of fluids. • Try ideas in Food Choices to Manage Constipation.*
Hand-foot skin reaction may occur during treatment with pegylated liposomal doxorubicin. The palms of your hands and soles of your feet may tingle, become red, numb, painful, or swollen. Skin may also become dry or itchy. You may not be able to do your normal daily activities if blisters, severe pain or ulcers occur.	 Avoid tight-fitting shoes or rubbing pressure to hands and feet, such as that caused by heavy activity. Avoid tight-fitting jewellery. Clean hands and feet with lukewarm water and gently pat to dry; avoid hot water. Apply lanolin-containing creams (e.g., BAG BALM®, UDDERLY SMOOTH®) to hands and feet, liberally and often. Take pyridoxine (vitamin B₆) 50-150 mg orally daily as directed by your doctor. Tell your healthcare team at the next visit if you have any signs of hand-foot skin reaction as your dose may need to be changed.
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 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 Try with a Sore Mouth.*

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SIDE EFFECTS	MANAGEMENT
Your white blood cells may decrease 10-14 days after your treatment. They usually return to normal 21-28 days 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. Take care of your skin and mouth. Avoid crowds and people who are sick. 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.
Your platelets may decrease 10-14 days after your treatment. They usually return to normal 21-28 days 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, but occasional use of ibuprofen may be acceptable.
Muscle or joint pain may occur a few days after your treatment.	You may take acetaminophen (e.g., TYLENOL®) or ibuprofen (e.g., ADVIL®). Tell your healthcare team if the pain interferes with your activity.
Swelling of hands, feet or lower legs may occur if your body retains extra fluid.	If swelling is a problem:Elevate your feet when sitting.Avoid tight clothing.
Tiredness and 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.*

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SIDE EFFECTS	MANAGEMENT
Hair loss is rare with pegylated liposomal doxorubicin. Your hair will grow back once you stop treatment with pegylated liposomal doxorubicin. Colour and texture may change.	If hair loss is a problem, refer to Resources for Hair Loss and Appearance Changes – Patient Handout.* • Use a gentle shampoo and soft brush. • Care should be taken with use of hair spray, bleaches, dyes and perms.
Loss of appetite and weight loss may occur.	•Try the ideas in Food Ideas to Help with Decreased Appetite.*

^{*}Please ask your nurse or pharmacist for a copy.

CHECK WITH YOUR HEALTHCARE TEAM OR GET EMERGENCY HELP IMMEDIATELY IF YOU HAVE:

- Signs of an **allergic reaction** (rare) soon after a treatment including dizziness, fast heart beat, face swelling or breathing problems.
- Signs of heart problems such as fast or uneven heartbeat, chest pain, chest pressure, shortness of breath or difficulty breathing, swelling of feet or lower legs, or fainting.
- 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); pain or burning when you pass urine; 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 stools; pinpoint red spots on skin, or extensive bruising.

CHECK WITH YOUR HEALTHCARE TEAM AS SOON AS POSSIBLE (DURING OFFICE HOURS) IF YOU HAVE:

- Painful hand-foot skin reaction such as swelling or blistering of the palms of your hands and/or the bottoms of your feet.
- Painful swelling or sores on your lips, tongue, mouth or throat.
- Signs of **liver problems** such as yellow eyes or skin, white or clay-coloured stools.

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

- Painless hand-foot skin reaction such as redness, peeling, tingling, numbness, or swelling of the palms of your hands and/or bottoms of your feet.
- Painless redness, swelling or sores on your lips, tongue, mouth or throat.
- Skin rash or itching.
- Uncontrolled nausea, vomiting or diarrhea.
- Easy bruising or minor bleeding.
- Redness, swelling, pain or sores where the needle was placed.

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REPORT ADDITIONAL PROBLEMS TO YOUR HEALTHCARE TEAM		

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