Sorafenib



For the Patient: Sorafenib
Other names: NEXAVAR®

- **Sorafenib** (so-RA-fe-nib) is a drug that is used to treat many types of cancer. It is a tablet that you take by mouth.
- A blood test may be taken before each treatment. The dose and timing of your chemotherapy may be changed based on the test results and/or other side effects.
- It is important to take sorafenib exactly as directed by your doctor. Make sure you
 understand the directions.
- **Take** sorafenib on an **empty** stomach. If you get nauseated from taking it on an empty stomach, try a small **low-fat** meal with it.
- If you miss a dose of sorafenib, take it as soon as you can if it is within 6 hours of the missed dose. If it is over 6 hours since your missed dose, skip the missed dose and go back to your usual dosing times.
- If you vomit the dose of sorafenib within 30 minutes of taking it, repeat the dose. Let
 your doctor know as a medication to prevent nausea may be required for future
 doses.
- Other drugs such as warfarin (COUMADIN®) may interact with sorafenib. Tell your doctor if you are taking this 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 sorafenib.
- It is not known if sorafenib causes sterility in men or menopause in women. If you
 plan to have children, discuss this with your doctor before being treated with
 sorafenib.
- Sorafenib may damage sperm and may harm the baby if used during pregnancy. It is
 best to use birth control while being treated with sorafenib. Tell your doctor right
 away if you or your partner becomes pregnant. Do not breast feed during treatment.
- **Store** sorafenib tablets out of the reach of children, at room temperature, away from heat, light, and moisture.

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- Tell doctors, dentists, and other health professionals that you are being treated with sorafenib before you receive any treatment from them.
- If you are planning to have major surgery (e.g., joint replacement), tell your surgeon that you are taking sorafenib. You may need to stop taking sorafenib at least 2 weeks prior to surgery. Restart it only after your doctor says your wounds have healed.

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.

SIDE EFFECTS	MANAGEMENT
Skin rashes, dryness or itching may sometimes occur.	 Wear loose cotton clothes. Urea-containing lotions may be helpful, particularly if the skin is very dry (e.g., UREMOL®, URISEC®) If very irritating, call your doctor. Otherwise, make sure to mention it at your next visit.
Hand-foot skin reaction may sometimes occur during sorafenib treatment. 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. Tell your cancer doctor or your nurse at the next visit if you have any signs of hand-foot skin reaction as your dose may need to be changed.
Diarrhea may sometimes occur.	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.*
Constipation may sometimes occur.	 Exercise if you can. Drink plenty of fluids. Try ideas in Food Choices to Manage Constipation.*

SIDE EFFECTS	MANAGEMENT
Nausea does not usually occur with sorafenib.	
Headache or pain may sometimes occur.	Take acetaminophen (e.g., TYLENOL®) every 4-6 hours if needed, to a maximum of 4 g (4000 mg) per day.
Your white blood cells may decrease during your 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 sorafenib and call your doctor <i>immediately</i> 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.
Your platelets may decrease during your 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.
Tiredness and lack of energy may sometimes occur.	 Do not drive a car or operate machinery if you are feeling tired. Try the ideas in Fatigue/Tiredness – Patient Handout.*
Hair loss sometimes occurs with sorafenib.	 Use a gentle shampoo and soft brush. Care should be taken with use of hair spray, bleaches, dyes, and perms.

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SIDE EFFECTS	MANAGEMENT
Numbness or tingling of the fingers or toes may sometimes occur.	Be careful when handling items that are sharp, hot or cold.
	 Tell your doctor at your next visit, especially if you have trouble with buttons, writing, or picking up small objects.
High blood pressure may sometimes occur. This can happen very quickly after	Your blood pressure will be checked during your visits to your doctor.
starting treatment.	 You may be asked to check your blood pressure frequently between visits.
	 Your doctor may give you medication if your blood pressure is high.
	 Tell your doctor if you are already on blood pressure medication. Your doctor may have to adjust your dose.

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

STOP TAKING SORAFENIB AND SEE YOUR DOCTOR OR GET EMERGENCY HELP IMMEDIATELY IF YOU HAVE:

- 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), 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; pinpoint red spots on skin; extensive bruising.
- 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 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.

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

- Signs of liver problems such as yellow eyes or skin, white or clay-coloured stools.
- Numbness or tingling in feet or hands.
- Skin rash or itching.
- Signs of anemia such as unusual tiredness or weakness.
- Headache or pain not controlled with acetaminophen (TYLENOL®).

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

- Easy bruising or minor bleeding.
- Redness, swelling, pain, or sores on your lips, tongue, mouth, or throat.
- Skin rash or itching.
- Impotence (loss of sexual ability)
- Weight loss or trouble eating.

REPORT ADDITIONAL PROBLEMS TO YOUR DOCTOR	