

## 為病人提供的藥物：巯嘌呤

藥物別名：PURINETHOL®

For the Patient: Mercaptopurine

Other names: PURINETHOL®



BC Cancer Agency

CARE + RESEARCH

An agency of the Provincial Health Services Authority

- 巯嘌呤(Mercaptopurine 英文讀音 mer-cap-toe-POOR-een) 是一種用來醫治若干白血病 (血癌)的藥物。這是口服藥片。  
Mercaptopurine (mer-cap-toe-POOR-een) is a drug that is used to treat some types of leukemia. It is a tablet that you take by mouth.
- 在服食巯嘌呤之前，如果您曾經對巯嘌呤有異常或過敏反應，請告訴醫生。  
Tell your doctor if you have ever had an unusual or **allergic reaction** to mercaptopurine before taking mercaptopurine.
- 在接受治療期間，會定期進行驗血。您的化療劑量及時間，可能會根據您的驗血結果及/或否有其他副作用而更改。  
**Blood tests** may be taken regularly during treatment. The dose and timing of your chemotherapy may be changed based on the test results and/or other side effects.
- 您必須完全按醫生指示來服用巯嘌呤。請確保您明白有關指示。每天均在相同時間服食巯嘌呤。最好是空腹服食，如有需要，也可以連同食物一同服藥。不要連同奶或奶類製品一同服食巯嘌呤，因為奶類含有一種酵素，可以分解這種藥物，減低它的成效。  
It is important to take mercaptopurine exactly as directed by your doctor. Make sure you understand the directions. Take mercaptopurine at the **same time** each day. It is best to take mercaptopurine on an **empty stomach**; you may take it with food if needed. Do not take mercaptopurine with **milk or milk-based products** because there is an enzyme in milk that can break down this drug and make it less effective.
- 如果您服食巯嘌呤 1 小時內嘔吐，請在辦公時間內致電醫生，請教醫生意見。您會獲告知是否需服食另一劑藥或待至下次服藥時間，才服另一劑藥。  
If you **vomit** within 1 hour of taking mercaptopurine, check with your doctor during office hours. You will be told whether to take the dose again or to wait until the next scheduled dose.
- 如果您錯過服食一劑巯嘌呤，請盡快在 12 小時內補服。如果錯過服食的時間超過 12 小時，則不用服食已漏服的劑量，繼續按照平常的服藥時間服食。  
If you **miss a dose** of mercaptopurine, take it as soon as you can if it is within 12 hours of the missed dose. If it is over 12 hours since your missed dose, skip the missed dose and go back to your usual dosing times.

- 您的醫生可能告訴您要額外多喝飲料，以便排出更多尿液。這樣有助預防腎病問題。  
Your doctor may tell you to **drink** extra fluids so that you will pass more urine. This will help prevent kidney problems.

- 其他藥物，例如 allopurinol (PURINOL®, ZYLOPRIM®)和華法林[warfarin (COUMADIN®)]可能會與巯嘌呤產生相互作用。如果您正服用這些藥物或其他藥物，請告訴醫生，因為您可能需要額外進行驗血，或者需要更改您的劑量。在開始服用任何其他新藥物時，請向醫生或藥劑師查詢。

Other drugs such as allopurinol (PURINOL®, ZYLOPRIM®) and warfarin (COUMADIN®) may **interact** with mercaptopurine. 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.

- 在接受任何防疫注射前，先與醫生商討。  
Talk to your doctor before receiving any **immunizations**.

- 飲酒(少量)似乎不會影響巯嘌呤的安全性能或效用。  
The **drinking of alcohol** (in small amounts) does not appear to affect the safety or usefulness of mercaptopurine.

- 巯嘌呤可能會破壞精子，如果女性在懷孕期間使用此藥，可能會傷害胎兒。在使用巯嘌呤治病期間，最好同時使用**避孕措施**。如果您或您的伴侶懷孕，請立即通知醫生。女性在使用巯嘌呤治病期間，切勿餵哺母乳。

Mercaptopurine may damage sperm and may harm the baby if used during pregnancy. It is best to use **birth control** while being treated with mercaptopurine. Tell your doctor right away if you or your partner becomes pregnant. Do not breast feed during treatment.

- 巯嘌呤應存放在小孩難以觸及的地方，並且存放於室溫下，遠離高溫、強光和潮濕之處。  
**Store** mercaptopurine tablets out of the reach of children, at room temperature, away from heat, light, and moisture.

- 在接受醫生或牙醫治療之前，請告訴他們您正服用巯嘌呤治病。  
**Tell** doctors or dentists that you are being treated with mercaptopurine before you receive any treatment from them.

## 血球數量的變化

### Changes in blood counts

巯嘌呤可能引致您的血球數量短暫出現變化，在進行血液測試後，您的醫生會慎重地跟進這些變化。在若干情況下，可能需要調校您的治療。

This drug may cause temporary changes in your blood counts. Your doctor will be following these changes carefully by performing blood tests. Adjustment of your treatment may be needed in certain circumstances.

<p style="text-align: center;"><b>血球數量</b> <b>BLOOD COUNTS</b></p>	<p style="text-align: center;"><b>控制方法</b> <b>MANAGEMENT</b></p>
<p>正常的白血球細胞抵禦引起感染的病菌，從而保護您的身體。當白血球數目減少，您較容易感染疾病。</p> <p>Normal white blood cells protect your body by fighting bacteria (germs) that cause infection. <b>When white blood cells are low, you are at greater risk of having an infection.</b></p>	<p>預防受到病菌感染，請注意以下各點：</p> <p>To help prevent infection:</p> <ul style="list-style-type: none"> <li>● 經常洗手，如廁後，緊記必須洗手。 Wash your hands often and always after using the bathroom.</li> <li>● 避免接觸大量群眾和病人。 Avoid crowds and people who are sick.</li> <li>● 一旦出現染病徵象，例如發熱(口腔探熱器超過華氏 100°或攝氏 38°)、發冷、咳嗽，或在小便時感到灼熱，<b>立即</b>致電醫生。 Call your doctor <b>immediately</b> 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>

<p style="text-align: center;"><b>血球數量</b> <b>BLOOD COUNTS</b></p>	<p style="text-align: center;"><b>控制方法</b> <b>MANAGEMENT</b></p>
<p>正常的血小板數目幫助您在受傷(例如割傷)時，血液得以凝固。當血小板數目偏低，您可能較易出現瘀斑或出血。</p> <p>Normal platelets help your blood to clot normally after an injury (e.g., cut). <b>When the platelet count is low, you may be more likely to bruise or bleed.</b></p>	<p>預防發生出血問題，請注意以下各點：</p> <p>To help prevent bleeding problems:</p> <ul style="list-style-type: none"> <li>● 嘗試避免造成瘀傷、割傷或燙傷。 Try not to bruise, cut, or burn yourself.</li> <li>● 清潔鼻子時，輕柔地擤鼻子，切勿挑挖鼻孔。 Clean your nose by blowing gently. Do not pick your nose.</li> <li>● 避免造成便秘。 Avoid constipation.</li> <li>● 用柔軟牙刷輕柔地清潔牙齒，因為您的牙肉會較容易出血。 Brush your teeth gently with a soft toothbrush as your gums may bleed more easily.</li> </ul> <p>服食某些藥物，諸如乙醯水楊酸(ASA)，例如：阿司匹靈(ASPIRIN®)或布洛芬(ibuprofen)，(例如：艾德威(ADVIL®))可能使您更容易出血。</p> <p>Some medications such as ASA (e.g., ASPIRIN®) or ibuprofen (e.g., ADVIL®) may increase your risk of bleeding.</p> <ul style="list-style-type: none"> <li>● 不要停止您醫生處方給您的任何藥物(例如為醫治心臟而處方的 ASA)。 Do not stop taking any medication that has been prescribed by your doctor (e.g., <b>ASA for your heart</b>).</li> <li>● 如有輕微痛楚，嘗試先服用乙醯氨酚[acetaminophen，例如：撲熱息痛(TYLENOL®)]，但偶爾服用布洛芬(ibuprofen)亦可以接受。 For minor pain, try acetaminophen (e.g., TYLENOL®) first, but occasional use of ibuprofen may be acceptable.</li> </ul>

以下列表綜列或會產生的副作用，並且依照它們可能出現的次序列出，表內亦包括如何控制有關副作用。

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.

- 一般來說，病人對巯嘌呤耐受性較好，罕有出現嚴重的副作用。  
Mercaptopurine is **usually well tolerated** and serious side effects are rare.

副作用 SIDE EFFECTS	控制方法 MANAGEMENT
<p>一般來說，巯嘌呤不會導致嘔心情況。 <b>Nausea</b> does not usually occur with mercaptopurine.</p>	
<p>可能出現皮膚紅疹 (罕見情況)。 <b>Skin rashes</b> may rarely occur.</p>	<p>防止痕癢，請注意以下各點： To help itching:</p> <ul style="list-style-type: none"> <li>• 您可以使用爐甘油潤膚品。 You can use calamine lotion.</li> <li>• 如果十分痕癢，請在辦公時間致電醫生。 If very irritating, call your doctor during office hours.</li> <li>• 否則，緊記在下次見醫生時提出這事。 Otherwise make sure to mention it at your next visit.</li> </ul>
<p>可能出現口腔疼痛 (罕見情況)。在舌頭、口腔兩側或喉嚨部位或會出現潰爛。口腔潰爛或牙肉出血，可能會造成感染。 <b>Sore mouth</b> may rarely occur. Mouth sores can occur on the tongue, the sides of the mouth, or in the throat. <b>Mouth sores or bleeding gums can lead to an infection.</b></p>	<ul style="list-style-type: none"> <li>• 在進食後及睡覺前，使用非常柔軟的牙刷潔淨牙齒。如果您的牙肉出血，可使用紗布而不用牙刷，使用蘇打粉 (baking soda) 而不用牙膏。 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.</li> <li>• 用半茶匙蘇打粉或鹽，加入一杯暖水中，開成漱口水，每日漱口數次。 Make a mouthwash with ½ teaspoon baking soda or salt in 1 cup warm water and rinse several times a day.</li> <li>• 嘗試仿效《化療期間口腔疼痛的食物選擇》(Food Ideas for a Sore Mouth During Chemotherapy)*所載建議。 Try the ideas in <i>Food Ideas for a Sore Mouth during Chemotherapy</i>.*</li> </ul>

副作用 SIDE EFFECTS	控制方法 MANAGEMENT
<p>當您服用巯嘌呤期間，出現脫髮現象屬於罕見。當您停止療程後，頭髮便會回復生長，但頭髮的顏色及髮質可能會有所改變。</p> <p><b>Hair loss is rare</b> with mercaptopurine. Your hair will grow back once you stop treatment with mercaptopurine. Colour and texture may change.</p>	<ul style="list-style-type: none"> <li>• 使用溫和的洗髮液及柔軟髮刷。 Use a gentle shampoo and soft brush.</li> <li>• 小心使用噴髮劑、漂髮劑、染髮劑和電髮劑。 Care should be taken with use of hair spray, bleaches, dyes, and perms.</li> </ul>
<p>在一些部位，例如手、手肘和膝部，皮膚可能變黑(罕見情況)。</p> <p><b>Darkening of the skin may rarely occur</b> in some areas such as your hands, elbows, and knees.</p>	<p>當您停止巯嘌呤療程後，情況便會慢慢回復正常。</p> <p>This will slowly return to normal once you stop treatment with mercaptopurine.</p>

\*請向化療護士或藥劑師索取副本。

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

如果您有以下症狀，請停服巯嘌呤，並向醫生求診或立即緊急求救：

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

- 出現**感染**徵象，例如發熱(口腔探熱器超過華氏 100°或攝氏 38°)、發冷顫、咳嗽、嚴重喉嚨痛、咳吐(咳出濃厚或綠色痰)、尿液混濁或發臭、疼痛、觸痛或皮膚有紅腫傷口或潰爛。  
Signs of an **infection** such as fever (over 100°F or 38°C by an oral thermometer), shaking chills; cough, 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.
- 出現**出血問題**徵象，例如黑色糞便、尿中帶血、皮膚出現小紅點、多處出現瘀斑。  
Signs of **bleeding problems** such as black, tarry stools; blood in urine; pinpoint red spots on skin; extensive bruising.
- 出現**過敏反應**(罕見情況)，包括暈眩、心跳急促、面部腫脹或呼吸問題。  
Signs of an **allergic reaction** (rare), including dizziness, fast heart beat, face swelling, or breathing problems.
- **腹部劇痛。**  
**Severe abdominal pain.**

如果您有以下症狀，請盡快(在辦公時間)向醫生求診：

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

- 出現**貧血**徵象，例如異常的疲倦或虛弱。  
Signs of **anemia** such as unusual tiredness or weakness.
- 出現**肝病問題**徵象，例如眼睛或皮膚發黃、糞便呈白色或黃泥色。  
Signs of **liver problems** such as yellow eyes or skin, white or clay-coloured stools.
- 出現**腎病問題**徵象，例如腰部或側身疼痛、雙腳或小腿腫脹。  
Signs of **kidney problems** such as lower back or side pain, swelling of feet or lower legs.

- 出現**痛風症**徵象，例如關節痛。  
Signs of **gout** such as joint pain.
- **走路**有困難。  
Trouble in **walking**.

如果持續有任何以下症狀或使您感到不適，請向醫生求診：

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

- 噁心、嘔吐或腹瀉情況不受控制。  
Uncontrolled nausea, vomiting, or diarrhea.
- 容易出現瘀斑或輕微出血。  
Easy bruising or minor bleeding.
- 在嘴唇、舌頭、口腔或喉嚨發紅、腫脹、疼痛或潰爛。  
Redness, swelling, pain, or sores on your lips, tongue, mouth, or throat.
- 皮膚出疹或痕癢。  
Skin rash or itching.

**如果尚有其他問題，請告知醫生！**

**REPORT ADDITIONAL PROBLEMS TO YOUR DOCTOR**

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