

# **ABVD Treatment**

This handout gives general information about this cancer treatment. You will learn:

- who to contact for help
- what the treatment is
- how it is given
- what to expect while on treatment



This handout was created by Ontario Health (Cancer Care Ontario) together with patients and their caregivers who have also gone through cancer treatment. It is meant to help support you through your cancer treatment and answer some of your questions.

This information does not replace the advice of your health care team. Always talk to your health care team about your treatment.

## Who do I contact if I have questions or need help?

My cancer health care provider is: \_\_\_\_\_

During the day I should contact:\_\_\_\_\_

Evenings, weekends and holidays:\_\_\_\_\_

## What is this treatment?

ABVD is the code name of your lymphoma treatment regimen.

A regimen is a combination of medications to treat cancer.

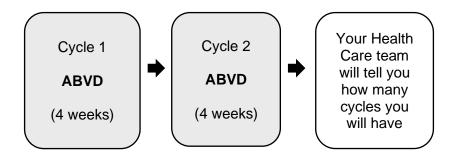
This regimen name is made up of letters from the names of the 4 medications in your treatment.

Here are the names of the medications in this regimen:

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A = doxorubicin (also called Adriamycin®)
B = Bleomycin
V = Vinblastine
D = Dacarbazine
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The treatment is divided into cycles. Each cycle is **4 weeks** long. Your health care team will tell you how many cycles you need.

Here is a picture of the schedule for ABVD treatment:



During each 4-week cycle, you will have ABVD treatment on days 1 and 15 at the hospital.

Each cycle looks like this:

Day 1	2	3	4	5	6	7
Treatment Day: Go to the	No ABVD Treatment					
hospital for ABVD Treatment.						
8	9	10	11	12	13	14
15 Treatment Day: Go to the	16 No ABVD	17	18	19	20	21
hospital for ABVD Treatment.	Treatment					
22	23	24	25	26	27	28

## Remember to:

- ✓ Tell your health care team about all of the other medications you are taking.
- ✓ Keep taking other medications that have been prescribed for you, unless you have been told not to by your health care team.

## How is this treatment given?

The medications in your treatment are given through an IV (injected into a vein) at the hospital.

You will have a blood test before each treatment cycle, and you may have a blood test before each treatment day to make sure it is safe for you to get treatment.

## What other medications are given with this treatment?

#### **To Prevent Nausea and Vomiting**

You will be given medications to help prevent nausea (feeling like throwing up) and vomiting (throwing up) before they start.

✓ These are called anti-nausea medications and include medications such as ondansetron (Zofran<sup>®</sup>), granisetron (Kytril<sup>®</sup>), dexamethasone or others.

#### **To Prevent Infection**

You may also be given a medication after each treatment day to increase your white blood cell count (neutrophils). This helps to prevent infection and make sure it is safe for you to get your next treatment.

• The medication may be called filgrastim (such as Nivestym<sup>™</sup>, Neupogen<sup>®</sup>, Grastofil<sup>®</sup>) or pegfilgrastim (such as Lapelga<sup>®</sup>, Fulphila<sup>®</sup>, Neulasta<sup>®</sup>).

#### To Prevent Tumor Lysis Syndrome (TLS)

TLS can happen when a large number of cancer cells die quickly and your body cannot get rid of them fast enough. TLS can make you very sick. Ask your health care team if you are at risk for TLS.

If you are at risk for TLS, you may be given medications before your ABVD treatment to help prevent it.

• These are called anti-uricemics (such as allopurinol), or others.

## DO this while on treatment

- ✓ DO tell your health care team about any other medical conditions that you have or had such as, hearing problems, heart (including irregular heartbeat), lung, liver, kidney or nerve problems (including numbness or tingling in your hands or feet), or any allergies.
- DO check with your health care team before getting any vaccinations, surgery, dental work or other medical procedures. Tell your health care team if you have had previous radiation therapy
- DO talk to your health care team about your risk of getting other cancers or heart problems after this treatment.
- DO consider asking someone to drive you to and from the hospital on your treatment days. You may feel drowsy or dizzy after your treatment.
- It is normal for your urine (pee) to be red for up to 2 days after your ABVD treatment. Tell your health care team if your pee stays red for more than 2 days.
- DO tell your health care team if you have any new pain, numbness or tingling of your hands or feet. This is especially important if you are having trouble doing tasks (like doing up buttons, writing, walking) or if you have severe pain or numbness.
- DO protect your skin from the sun.
   Wear a long sleeved shirt, long pants and a hat. Apply sunscreen

with UVA and UVB protection and an SPF of at least 30. Your skin may be more sensitive to the sun and you could develop a bad sunburn or rash more easily.

# DO NOT do this while on treatment



- X DO NOT take any other medications, such as vitamins, over-the-counter (nonprescription) drugs, or natural health products without checking with your health care team.
- X DO NOT start any complementary or alternative therapies, such as acupuncture or homeopathic medications, without checking with your health care team.
- X DO NOT eat or drink grapefruit, starfruit, Seville oranges or their juices (or products that contain these) while on this treatment. They may increase side effects.
- X DO NOT smoke or drink alcohol while on treatment without talking to your health care team first. Smoking and drinking can make side effects worse and make your treatment not work as well.

# Will this treatment interact with other medications or natural health products?

Yes, the medications in this regimen can interact with other medications, vitamins, foods and natural health products. Interactions can make the treatment not work as well or cause severe side effects.

Tell your health care team about all of your:

- prescription and over-the-counter (non-prescription) medications
- natural health products such as vitamins, herbal teas, homeopathic medicines, and other supplements

Check with your health care team before starting or stopping any of them.

\*If you take seizure medications (such as phenytoin), your health care team will monitor your blood levels closely and may change your dose.



### Talk to your health care team BEFORE taking or using these

- Anti-inflammatory medications such as ibuprofen (Advil<sup>®</sup> or Motrin<sup>®</sup>), naproxen (Aleve<sup>®</sup>) or Aspirin<sup>®</sup>
- Over-the-counter products such as dimenhydrinate (Gravol<sup>®</sup>)
- Natural health products such as St. John's Wort
- Supplements such as vitamin C
- Alcoholic drinks
- Tobacco
- All other drugs, such as marijuana (medical or recreational)

# What should I do if I feel unwell, have pain, a headache or a fever?

- Always check your temperature to see if you have a fever before taking any medications for fever or pain (such as acetaminophen (Tylenol)).
  - $\circ$  Fever can be a sign of infection that may need treatment right away.
  - If you take these medications before you check for fever, they may lower your temperature and you may not know you have an infection.

#### How to check for fever:

Keep a digital (electronic) thermometer at home and take your temperature if you feel hot or unwell (for example, chills, headache, mild pain).

- You have a fever if your temperature taken in your mouth (oral temperature) is:
  - o 38.3°C (100.9°F) or higher at any time

OR

• 38.0°C (100.4°F) or higher for at least one hour.

## If you do have a fever:

- Try to contact your health care team. If you are not able to talk to them for advice, you MUST get emergency medical help right away.
- ✓ Ask your health care team for the <u>Fever</u> pamphlet for more information.

If you do not have a fever but have mild symptoms such as headache or mild pain:

Ask your health care team about the right medication for you. Acetaminophen (Tylenol®) is a safe choice for most people.



**Talk to your health care team before you start taking** ibuprofen (Advil®, Motrin®), naproxen (Aleve®) or ASA (Aspirin®), as they may increase your chance of bleeding or interact with your cancer treatment.



Talk to your health care team if you already take **low dose aspirin** for a medical condition (such as a heart problem). It may still be safe to take.

# How will this treatment affect sex, pregnancy and breast feeding?

#### Talk to your health care team about:

- How this treatment may affect your sexual health.
- Changes to your menstrual cycle (periods), if this applies to you.
- How this treatment may affect your ability to have a baby, if this applies to you.

This treatment may harm an unborn baby. Tell your health care team if you or your partner are pregnant, become pregnant during treatment, or are breastfeeding.

- If there is **any** chance of pregnancy happening, you and your partner together must use 2 **effective forms of birth control** at the same time for at least **6 months** after your last treatment dose. Talk to your health care team about which birth control options are best for you.
- Do not breastfeed while on this treatment.

## What are the side effects of this treatment?

The following table lists side effects that you may have when getting ABVD treatment. The table is set up to list the most common side effects first and the least common last. It is unlikely that you will have all of the side effects listed and you may have some that are not listed.

Read over the side effect table so that you know what to look for and when to get help. Refer to this table if you experience any side effects while on ABVD treatment.

Very Common Side Effects (50 or more out of 100 people)		
Side effect and what to do	When to contact health care team	
Low neutrophils (white blood cells) in the blood (neutropenia)	If you have a fever, try to contact your health care team. If	
(May be severe)	you are unable to talk to the team for	
When neutrophils are low, you are at risk of getting an infection more easily. Ask your health care team for the <u>Neutropenia (Low Neutrophil</u> <u>Count)</u> pamphlet for more information.	advice, you MUST get emergency medical help right away	
What to look for?		
<ul> <li>If you feel hot or unwell (for example if you have chills or a new cough), you <b>must</b> check your temperature to see if you have a fever.</li> <li>Do not take medications that treat a fever before you take your temperature (for example, Tylenol®, acetaminophen, Advil® or ibuprofen).</li> <li>Do not eat or drink anything hot or cold right before taking your temperature.</li> </ul>		
You have a fever if your temperature taken in your mouth (oral temperature) is:		
<ul> <li>38.3°C (100.9°F) or higher at any time</li> </ul>		
OR		
<ul> <li>38.0°C (100.4°F) or higher for at least one hour.</li> </ul>		

Very Common Side Effects (50 or more out of 100 people)			
Side effect and what to do	When to contact health care team		
<ul> <li>What to do?</li> <li>If your health care team has told you that you have low neutrophils: <ul> <li>Wash your hands often to prevent infection.</li> <li>Check with your health care team before getting any vaccines, surgeries, medical procedures or visiting your dentist.</li> <li>Keep a digital thermometer at home so you can easily check for a fever.</li> </ul> </li> <li>If you have a fever:</li> </ul>			
If you have a fever, try to contact your health care team. If you are unable to talk to the team for advice, you must get emergency medical help right away.			
<ul> <li>Low platelets in the blood</li> <li>(May be severe)</li> <li>When your platelets are low, you are at risk for bleeding and bruising. Ask your health care team for the Low Platelet Count pamphlet for more information.</li> <li>What to look for?</li> <li>Watch for signs of bleeding:</li> </ul>	Talk to your health care team if you have any signs of bleeding. If you have bleeding that doesn't stop or is severe (very heavy), you MUST get emergency medical help right away		
<ul> <li>Watch for signs of bleeding.</li> <li>bleeding from your gums</li> <li>unusual or heavy nosebleeds</li> <li>bruising easily or more than normal</li> <li>black coloured stools (poo) or blood in your stools (poo)</li> <li>coughing up red or brown coloured mucus</li> <li>dizziness, constant headache or changes in your vision</li> <li>heavy vaginal bleeding</li> <li>red or pink coloured urine (pee)</li> </ul>			

Side effect and what to do	When to contact health care team
What to do?	
If your health care team has told you that you have low platelets:	
<ul> <li>Tell your pharmacist that your platelet count may be low before taking any prescriptions or over-the-counter medication.</li> <li>Check with your healthcare team before you go to the dentist.</li> <li>Take care of your mouth and use a soft toothbrush.</li> <li>Try to prevent cuts and bruises.</li> <li>Ask your health care team what activities are safe for you.</li> <li>Your treatment may have to be delayed if you have low platelets. Your health care team may recommend a blood transfusion.</li> </ul>	
If you have signs of bleeding:	
• If you have a small bleed, clean the area with soap and water or a saline (saltwater) rinse. Apply pressure for at least 10 minutes.	
If you have bleeding that does not stop or is severe (very heavy), you must get emergency medical help right away.	
Hair thinning or loss	Talk to your
What to look for?	health care team if this bothers you
<ul> <li>Your hair may become thin or fall out during or after treatment.</li> <li>In most cases, your hair will grow back after treatment. The texture or colour may change.</li> <li>In very rare cases, hair loss may be permanent.</li> </ul>	
What to do?	
<ul> <li>Use a gentle soft brush.</li> <li>Do not use hair sprays, bleaches, dyes and perms.</li> </ul>	

Very Common Side Effects (50 or more out of 100 people)

Very Common Side Effects (50 or more out of 100 people)		
Side effect and what to do	When to contact health care team	
Nausea and vomiting	Talk to your health	
(May be severe)	care team if nausea lasts more than 48 hours or vomiting	
What to look for?	lasts more than 24 hours or if it is	
<ul> <li>Nausea is feeling like you need to throw up. You may also feel light-headed.</li> </ul>	severe	
<ul> <li>You may feel nausea within hours to days after your treatment.</li> </ul>		
What to do?		
To help prevent nausea:		
<ul> <li>It is easier to prevent nausea than to treat it once it happens.</li> <li>Take your anti-nausea medication(s) as prescribed, even if you do not feel like throwing up.</li> <li>Drink clear liquids and have small meals. Get fresh air and rest.</li> <li>Do not eat spicy, fried foods or foods with a strong smell.</li> <li>Limit caffeine (like coffee, tea) and avoid alcohol.</li> </ul>		
If you have nausea or vomiting:		
<ul> <li>Take your rescue (as-needed) anti-nausea medication(s) as prescribed.</li> <li>Ask your health care team for the <u>Nausea and Vomiting</u> pamphlet for more information.</li> <li>Talk to your health care team if:         <ul> <li>nausea lasts more than 48 hours</li> <li>vomiting lasts more than 24 hours or if it is severe</li> </ul> </li> </ul>		
Low Appetite	Talk to your health care team if it does	
What to look for?	not improve or if it is severe	
<ul><li>Loss of interest in food or not feeling hungry.</li><li>Weight loss.</li></ul>		

Very Common Side Effects (50 or more out of 100 people)		
Side effect and what to do	When to contact health care team	
What to do?		
<ul> <li>Try to eat your favourite foods</li> <li>Eat small meals throughout the day.</li> <li>You may need to take meal supplements to help keep your weight up.</li> <li>Talk to your health care team if you have no appetite</li> </ul>		
Ask your health care team for the Loss of Appetite pamphlet for more information.		
<ul> <li>Fever, Flu-like symptoms</li> <li>You may feel like you have the flu for around 2 days after your IV treatment. These flu-like symptoms may not be signs of an infection.</li> <li>What to look for? <ul> <li>You may have fever, chills, headache and muscle pain.</li> <li>You may feel tired and have a poor appetite.</li> <li>Symptoms may happen at any time after you receive your treatment and usually go away as your body gets used to the medication.</li> </ul> </li> </ul>	Talk to your health care team if no improvement or if severe	
What to do?		
<ul> <li>Check your temperature to see if you have a fever. Read the above section "What should I do if I feel unwell, have pain, a headache or a fever?".</li> <li>If you do have a fever, try to speak to your health care team. If you are unable to talk to them for advice, you MUST get emergency medical help right away.</li> </ul>		

Common Side Effects (25 to 49 out of 100 people)		
Side effect and what to do	When to contact health care team	
Fatigue	Talk to your health	
What to look for?	care team if it does not improve or if it is severe	
<ul> <li>Feeling of tiredness or low energy that lasts a long time and does not go away with rest or sleep.</li> </ul>		
What to do?		
<ul> <li>Be active. Aim to get 30 minutes of moderate exercise (you are able to talk comfortably while exercising) on most days.</li> <li>Check with your health care team before starting any new exercise.</li> <li>Pace yourself, do not rush. Put off less important activities. Rest when you need to.</li> <li>Ask family or friends to help you with things like housework, shopping, and child or pet care.</li> <li>Eat well and drink at least 6 to 8 glasses of water or other liquids every day (unless your health care team has told you to drink more or less).</li> <li>Avoid driving or using machinery if you are feeling tired.</li> </ul>		
Darkening or thickening of the skin; Rash, itchy skin; Redness, swelling of the hands or feet	Talk to your health care team if it does not improve or if it is severe	
What to look for?		
<ul> <li>Cracked, rough, flaking or peeling of your skin.</li> <li>Thickening of your skin, especially on your hands.</li> <li>Darkening of your skin or a rash. This may happen near folds or creases, or in areas with a lot of rubbing / pressure (such as your hands and feet).</li> <li>Red and warm areas of your skin.</li> </ul>		

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Common Side Effects (25 to 49 out of 100 people)			
Side effect and what to do	When to contact health care team		
<ul> <li>Itching, burning, stinging or areas that are very tender when touched.</li> </ul>			
The rash may be seen in areas where you have had radiation before.			
What to do?			
To prevent and treat itchy skin:			
<ul> <li>Use fragrance-free skin moisturizer.</li> <li>Protect your skin from the sun and the cold.</li> <li>Use sunscreen with UVA and UVB protection and a SPF of at least 30.</li> <li>Avoid perfumed products and lotions that contain alcohol.</li> <li>Drink 6 to 8 cups of non-alcoholic, non-caffeinated liquids each day, unless your health care team has told you to drink more or less.</li> </ul>			
Rash may be severe in some rare cases and cause your skin to blister or peel. If this happens, get emergency medical help right away.			
Mouth sores	Talk to your health care team as soon		
(May be severe)	as you notice mouth or lip sores or		
What to look for?	if it hurts to eat, drink or swallow		
<ul> <li>Round, painful, white or gray sores inside your mouth that can occur on the tongue, lips, gums, or inside your cheeks.</li> <li>In more severe cases they may make it hard to swallow, eat or brush your teeth.</li> <li>They may last for 3 days or longer.</li> </ul>			
What to do?			
To help prevent mouth sores:			
<ul> <li>Take care of your mouth by gently brushing and flossing regularly.</li> </ul>			

Common Side Effects (25 to 49 out of 100 people)			
Side effect and what to do	When to contact health care team		
<ul> <li>Rinse your mouth often with a homemade mouthwash.</li> <li>To make a homemade mouthwash, mix 1 teaspoonful of baking soda and 1 teaspoonful of salt in 4 cups (1L) of water.</li> <li>Do not use store-bought mouthwashes, especially those with alcohol, because they may irritate your mouth.</li> </ul>			
If you have mouth sores:			
<ul> <li>Avoid hot, spicy, acidic, hard or crunchy foods.</li> <li>Your doctor may prescribe a special mouthwash to relieve mouth sores and prevent infection.</li> <li>Talk to your health care team as soon as you notice mouth or lip sores or if it hurts to eat, drink or swallow.</li> </ul>			
Ask your health care team for the Oral Care (Mouth Care) pamphlet for more information.			

Less Common Side Effects (10 to 24 out of 100 people)			
Side effect and what to do	When to contact health care team		
Diarrhea	Talk to your health care team if no		
What to look for?	improvement after 24 hours of taking		
<ul> <li>Loose, watery, unformed stool (poo) that may happen days to weeks after you get your treatment.</li> </ul>	diarrhea medication or if severe (more than 7 times in one		
What to do?	day)		
If you have diarrhea:			
<ul> <li>Take anti-diarrhea medication if your health care team prescribed it or told you to take it.</li> <li>Do not eat foods or drinks with artificial sweetener (like chewing gum or 'diet' drinks), coffee and alcohol.</li> <li>Eat many small meals and snacks instead of 2 or 3 large meals.</li> </ul>			

Less Common Side Effects (10 to 24 out of 100 people)		
Side effect and what to do	When to contact health care team	
<ul> <li>Drink at least 6 to 8 cups of liquids each day, unless your health care team has told you to drink more or less.</li> <li>Talk to your health care team if you can't drink 6 to 8 cups of liquids each day when you have diarrhea. You may need to drink special liquids with salt and sugar, called Oral Rehydration Therapy.</li> <li>Talk to your health care team if your diarrhea does not improve after 24 hours of taking diarrhea medication or if you have diarrhea more than 7 times in one day.</li> </ul>		
Ask your health care team for the <u>Diarrhea</u> pamphlet for more information.		
<ul> <li>Constipation</li> <li>(May be severe)</li> <li>What to look for?</li> <li>Having bowel movements (going poo) less often than normal.</li> <li>Small hard stools (poo) that look like pellets.</li> <li>The need to push hard and strain to have any stool (poo) come out.</li> <li>Stomach ache or cramps.</li> <li>A bloated belly, feeling of fullness, or discomfort.</li> <li>Leaking of watery stools (poo).</li> <li>Lots of gas or burping.</li> <li>Nausea or vomiting</li> </ul>	Talk to your health care team if it does not improve or if it is severe (no bowel movement for more than 3 days or severe belly pain)	
<ul> <li>What to do?</li> <li>To help prevent constipation:</li> <li>Try to eat more fiber rich foods like fruits with skin, leafy greens and whole grains.</li> <li>Drink at least 6 to 8 cups of liquids each day unless your health care team has told you to drink more or less.</li> <li>Be Active. Exercise can help to keep you regular.</li> <li>If you take opioid pain medication, ask your health care team if eating more fibre is right for you.</li> </ul>		

Less Common Side Effects (10 to 24 out of 100 people)			
Side effect and what to do	When to contact health care team		
<ul> <li>To help treat constipation:</li> <li>If you have not had a bowel movement in 2 to 3 days you may need to take a laxative (medication to help you poo) to help you have regular bowel movements. Ask your health care team what to do.</li> <li>Ask your health care team for the <u>Constipation</u> Pamphlet for more information.</li> </ul>			
Reactions at the injection site What to look for?	Talk to your health care team as soon as possible		
<ul> <li>Your skin may become red, itchy, bruised, and/or swollen where the injection was given.</li> <li>Site reactions are usually mild and go away within one to three days.</li> </ul>			
<ul> <li>What to do?</li> <li>Tell your nurse right away if there is any burning, stinging or other pain while doxorubicin is being injected into your vein.</li> <li>You may need to apply hot compresses or ice/cold compresses if you have mild redness or discomfort. This depends on which medication caused the reaction in your treatment.</li> <li>Talk to your health care team to find out which treatment is right for you.</li> </ul>			
<ul> <li>Nail changes</li> <li>What to look for?</li> <li>You may have changes in nail colour, pain or tenderness, swelling of cuticles, or skin thickening.</li> <li>Nails will slowly return to normal after treatment ends.</li> </ul>	Talk to your health care team if it does not improve or if it is severe		

Less Common Side Effects (10 to 24 out of 100 people)	
Side effect and what to do	When to contact health care team
What to do?	
<ul> <li>Moisturize your nails and cuticles.</li> <li>Do not use nail polish and fake fingernails until your nails have gone back to normal.</li> <li>Wear gloves when doing house chores or gardening.</li> </ul>	
Changes in heart rhythm	Get emergency medical help right
<ul> <li>What to look for?</li> <li>This is usually mild with no symptoms.</li> <li>Your health care team may monitor this for you.</li> </ul>	away
<ul> <li>You may have an irregular heartbeat, shortness of breath, chest pain or fainting spells (passing out).</li> </ul>	
What to do?	
Get emergency medical help right away if you have any symptoms of changes in your heart rhythm.	
Neuropathy (Tingling, numb toes or fingers)	Talk to your health care team, especially
(May be severe)	if you have trouble doing tasks like
What to look for?	doing up buttons writing, moving, or if
<ul> <li>Numbness or tingling of your fingers and toes may happen after starting your treatment.</li> <li>Sometimes it can be painful and feel like burning sensation, which may be severe.</li> </ul>	you have severe pain or numbness
What to do?	
<ul> <li>Talk to your health care team if you have symptoms of neuropathy.</li> </ul>	

Less Common Side Effects (10 to 24 out of 100 people)	
Side effect and what to do	When to contact health care team
<ul> <li>Numbness and tingling may slowly get better after your treatment ends.</li> </ul>	
In rare cases, it may continue long after treatment ends. If you continue to have bothersome symptoms, talk to your health care team for advice.	
Cough and feeling short of breath	Talk to your health care team. If you are
(May be severe) What to look for?	not able to talk to your health care team for advice, and you have a fever or severe symptoms, you MUST get emergency medical help right away.
<ul> <li>You may have a cough and feel short of breath.</li> <li>Symptoms that commonly occur with a cough are:         <ul> <li>Wheezing or a whistling breathing</li> <li>Runny nose</li> <li>Sore throat</li> <li>Heartburn</li> <li>Weight loss</li> <li>Fevers and chills</li> </ul> </li> </ul>	
Rarely this may be severe with chest pain, trouble breathing or coughing up blood.	
What to do?	
<ul> <li>Check your temperature to see if you have a fever. Read the above section "What should I do if I feel unwell, have pain, a headache or a fever?".</li> <li>If you have a fever, try to talk to your health care team. If you are not able to talk to them for advice, you MUST get emergency medical help right away.</li> <li>If you have a severe cough with chest pain, trouble breathing or you are coughing up blood, get medical help right away.</li> </ul>	

### Other rare, but serious side effects are possible with this treatment.

If you have **any** of the following, talk to your cancer health care team or get emergency medical help right away:

- New swelling in your legs or belly
- New pain in your chest or arm
- Pain, swelling or hardening of a vein in your arm or leg
- Trouble seeing, speaking, or using your arms and legs
- Any changes to your hearing
- Muscle twitching, severe weakness or cramping
- Seizures, feeling confused
- Severe rash, itchiness, flushing, dizziness, chest or throat tightness (during or shortly after your treatment is given)
- Peeing less than usual, new pain in your lower back, swelling in your hands, ankles, feet or other areas of your body
- Pain or difficulty with going pee
- Yellowish skin or eyes, or pain on the right side of your belly
- Weight gain that is not normal for you
- Difficulty swallowing
- Drooping eyelids or face, drooling

For an electronic copy of this document, visit: cancercareontario.ca/regimeninfo

For more information on how to manage your symptoms ask your health care provider, or visit: <u>www.cancercareontario.ca/en/symptom-management</u>

## Notes

The information set out in the medication information sheets, regimen information sheets, and symptom management information(for patients) contained in the Drug Formulary (the "Formulary") is intended to be used by health professionals and patients for informational purposes only. The information is not intended to cover all possible uses, directions, precautions, drug interactions or side effects of a certain drug, nor should it be used to indicate that use of a particular drug is safe, appropriate or effective for a given condition.

A patient should always consult a healthcare provider if he/she has any questions regarding the information set out in the Formulary. The information in the Formulary is not intended to act as or replace medical advice and should not be relied upon in any such regard. All uses of the Formulary are subject to clinical judgment and actual prescribing patterns may not follow the information provided in the Formulary.