

CAPE 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?

CAPE is the code name of your cancer treatment regimen. It may be used to treat colorectal, pancreas, breast or other cancers.

This regimen name is made up of one or more letters from the name of the medication in your treatment.

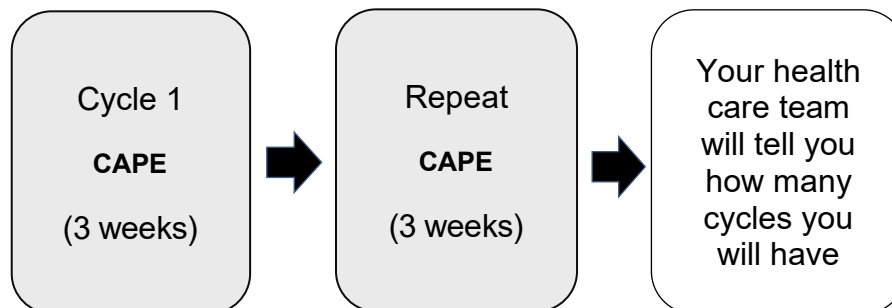
Here is the name of the medication in this regimen:

CAPE = CAPEcitabine

For most people, treatment is divided into cycles. Each cycle is **3 weeks** long. Your health care team will tell you how many cycles you need.

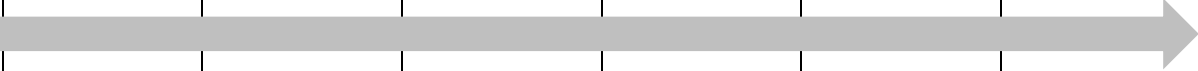
Capecitabine may be given on a schedule that is different from what is shown on the calendar below. Speak with your health care team to see if the below schedule applies to you.

Here is a picture of the schedule for CAPE treatment:



During each 3-week cycle, you will take capecitabine tablets for 14 days at home (2 weeks on, 1 week off).

Each cycle looks like this:

Day 1	2	3	4	5	6	7
Take your capecitabine (morning and evening)	Take your capecitabine (morning and evening)	Take your capecitabine (morning and evening)	Take your capecitabine (morning and evening)	Take your capecitabine (morning and evening)	Take your capecitabine (morning and evening)	Take your capecitabine (morning and evening)
8	9	10	11	12	13	14
Take your capecitabine (morning and evening)	Take your capecitabine (morning and evening)	Take your capecitabine (morning and evening)	Take your capecitabine (morning and evening)	Take your capecitabine (morning and evening)	Take your capecitabine (morning and evening)	Take your capecitabine (morning and evening)
15	16	17	18	19	20	21
NO capecitabine Treatment						



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?

Capecitabine is given as tablets that you swallow.

- **Your health care team will tell you how many capecitabine tablets you need to take.**
- Do not take your medicine more often or for longer than you have been told to.
- You may need tablets of different strengths to get the right dose. Make sure you **look at the tablets closely** so that you take the right dose.
- Take capecitabine two times each day. Space each dose about 12 hours apart.
- Swallow the tablets whole with a full glass of water. Take with food (up to 30 minutes after eating a meal (for example, right after breakfast and dinner)).
- Do not crush or chew capecitabine tablets.
- If you forget to take a dose, do not take an extra dose to make up for the missed dose. Follow the instructions given to you or talk to your health care team if you are unsure about what to do. If you are unable to talk to your health care team, take your next dose at the usual time.

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

Warning: If you take too much capecitabine by accident, or if you think a child or a pet may have swallowed your capecitabine, you must call the Ontario Poison Control Center right away at: 1-800-268-9017.

How to safely handle and store your medication:

- Keep capecitabine tablets in the original packaging at room temperature in a dry place, away from heat and light.
- Keep out of sight and reach of children and pets.
- Do not throw out any unused capecitabine tablets at home. Bring them to your pharmacy to be thrown away safely.

How to safely touch your medication

If you are a patient:

- Wash your hands before and after touching capecitabine.

If you are a caregiver:

- Wear nitrile or latex gloves when touching capecitabine tablets.
- Wash your hands before putting on your gloves and after taking them off, even if your skin did not touch the capecitabine tablets.
- Throw out your gloves after each use. Do not re-use gloves.
- Do not touch capecitabine if you are pregnant or breastfeeding.

What to do if your medication gets on your skin or in your eyes

If medication gets on your skin:

- Wash your skin with a lot of soap and water.
- If your skin gets red or irritated, talk to your health care team.

If medication gets in your eyes:

- Rinse your eyes with running water right away. Keep water flowing over your open eyes for at least 15 minutes.

What to do if you vomit (throw up) after taking your medication:

Talk to your health care team. Do not take another dose until you have talked to them. If you are unable to talk to your healthcare team, take your next dose at the usual time.

What other medications are given with this treatment?

To Prevent Nausea and Vomiting

You may be given medications to have at home in case you have nausea (feeling like throwing up) or vomiting (throwing up):

- These are called anti-nausea medications and include medications such as prochlorperazine (Stemetil[®]), metoclopramide (Maxeran[®]) or others.

To Treat Diarrhea

Capecitabine can cause diarrhea. Diarrhea is when you have loose bowel movements (watery poo) or you need to go poo (have bowel movements) more often than usual. Diarrhea may start a few days after your treatment begins.

You will be given a medication called loperamide (Imodium[®]) to help treat diarrhea. Take this medication only if you need it.

Keep your loperamide with you all the time. If diarrhea starts, take the loperamide right away.

If you start to have diarrhea:

- Take 2 tablets (4mg) of loperamide right away.
- Take 1 tablet after each loose bowel movement (watery poo).
- Do not take more than 8 tablets in one day.

What other important things should I know about this treatment?

Hand-foot Syndrome

Hand-foot syndrome is a side effect you may have from capecitabine treatment. It affects the skin on your hands and the bottoms of your feet. It usually starts with tingling or swelling of your skin. Your skin can become painful, red and numb. Your skin may start to peel, and you can get blisters or sores. This may start after your treatment begins.

You can help to prevent symptoms of hand-foot syndrome by doing these things:

- Keep your skin moist, especially in the skin folds.
- Gently apply moisturizer cream or lotion to the inside of your hands and bottom of your feet as needed. Choose a fragrance-free cream that contains lanolin (like Bag Balm®, Udderly Smooth®) or urea 10% (like Uremol 10®).
- Do not let your hands and feet get too hot. Wash sweat from your skin. Bathe or shower in lukewarm water and gently pat yourself dry.
- Do not do activities that cause rubbing or pressure on your skin, like heavy-duty washing, gripping tools, typing, playing musical instruments, and driving.
- Wear gloves while cleaning to protect your skin from things like laundry detergent, bleach, cleaning products, and dish soap.
- Wear loose fitting clothes and loose fitting, comfortable shoes with cushioned soles. Do not walk in bare feet.
- Drink 6–8 glasses of liquids each day unless your health care team told you otherwise.

DO this while on treatment

- ✓ DO tell your health care team about any other medical conditions that you have such as heart, liver, or kidney problems, if you have or had personal or family history of severe side effects with other drugs (especially a drug called fluorouracil) or any allergies or intolerances.
- ✓ DO tell your doctor if you have been told you lack the enzyme dihydropyrimidine dehydrogenase (DPD).
- ✓ DO check with your health care team before getting any vaccinations, surgery, dental work or other medical procedures.
- ✓ DO talk to your health care team about your risk of getting heart problems with this treatment.

DO NOT do this while on treatment



- X DO NOT take any other medications, such as vitamins, over-the-counter (non-prescription) 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 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 are taking seizure medications (such as phenytoin), your health care team will monitor your blood levels closely and may change your dose.

If you are taking a blood thinner (such as warfarin), your health care team may need extra blood tests and may change your dose.



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

- Anti-inflammatory medications such as ibuprofen (Advil® or Motrin®), naproxen (Aleve®) or Aspirin®
- Over-the-counter products such as dimenhydrinate (Gravol®)
- Natural health products such as St. John's Wort
- Supplements such as vitamin C
- Grapefruit juice
- 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) or ibuprofen (Advil)).
 - 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:
 - 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 [Fever](#) 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.
- 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 until 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 use hormonal birth control (such as birth control pills), unless your health care team told you that they are safe. Talk to your health care team about the safest birth control for you.
- Do not breastfeed while on this treatment and for **2 weeks** after the last dose.

What are the side effects of this treatment?

The following table lists side effects that you may have when getting CAPE 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. Keep this paper during your treatment so that you can refer to it if you need to.

Very Common Side Effects (50 or more out of 100 people)	
Side effects and what to do	When to contact health care team
<p>Rash on your hands and feet (hand-foot syndrome)</p> <p>(May be severe)</p> <p>What to look for?</p> <ul style="list-style-type: none"> • Tingling or swelling of the skin on the palms of your hands and the bottoms of your feet. This can become painful, red and numb. • Your skin may start to peel, and you can get blisters or sores. • This may happen days or weeks after you start treatment. <p>What to do?</p> <p>To help prevent hand-foot syndrome:</p> <ul style="list-style-type: none"> • Do not do activities that cause rubbing or pressure on your skin, like heavy-duty washing, gripping tools, typing, playing musical instruments, and driving. • Moisturize your hands and feet often, especially in the skin folds. • Wear loose, comfortable footwear and clothes. • Rest and try to keep off your feet. • Do not let your hands and feet get too hot. <p>Ask your health care team for the Hand-foot syndrome pamphlet for more information.</p>	<p>Talk to your health care team if it does not improve or if it is severe</p>

Common Side Effects (25 to 49 out of 100 people)	
Side effects and what to do	When to contact health care team
<p>Diarrhea</p> <p>What to look for?</p> <ul style="list-style-type: none"> Loose, watery, unformed stool (poo) that may happen days to weeks after you get your treatment. <p>What to do?</p> <p>If you have diarrhea:</p> <ul style="list-style-type: none"> Take anti-diarrhea medication if your health care team prescribed it or told you to take it. Do not eat foods or drinks with artificial sweetener (like chewing gum or 'diet' drinks), coffee and alcohol. Eat many small meals and snacks instead of 2 or 3 large meals. Drink at least 6 to 8 cups of liquids each day, unless your health care team has told you to drink more or less. 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. 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. <p>Ask your health care team for the Diarrhea pamphlet for more information.</p>	<p>Talk to your health care team if no improvement after 24 hours of taking diarrhea medication or if severe (more than 7 times in one day)</p>
<p>Nausea and vomiting</p> <p>(Generally mild)</p> <p>What to look for?</p> <ul style="list-style-type: none"> Nausea is feeling like you need to throw up. You may also feel light-headed. You may feel nausea within hours to days after your treatment. 	<p>Talk to your health care team if nausea lasts more than 48 hours or vomiting lasts more than 24 hours or if it is severe</p>

Common Side Effects (25 to 49 out of 100 people)	
Side effects and what to do	When to contact health care team
<p>What to do?</p> <p>To help prevent nausea:</p> <ul style="list-style-type: none"> • Drink clear liquids and have small meals. Get fresh air and rest. • Do not eat spicy, fried foods or foods with a strong smell. • Limit caffeine (like coffee, tea) and avoid alcohol. <p>If you have nausea or vomiting:</p> <ul style="list-style-type: none"> • Take your rescue (as-needed) anti-nausea medication(s) as prescribed. • Ask your health care team for the Nausea & Vomiting pamphlet for more information. • Talk to your health care team if: <ul style="list-style-type: none"> ○ nausea lasts more than 48 hours ○ vomiting lasts more than 24 hours or if it is severe 	

Less Common Side Effects (10 to 24 out of 100 people)	
Side effects and what to do	When to contact health care team
<p>Mouth sores</p> <p>What to look for?</p> <ul style="list-style-type: none"> • Round, painful, white or gray sores inside your mouth that can occur on the tongue, lips, gums, or inside your cheeks. • In more severe cases they may make it hard to swallow, eat or brush your teeth. • They may last for 3 days or longer. 	<p>Talk to your health care team as soon as you notice mouth or lip sores or if it hurts to eat, drink or swallow</p>

Less Common Side Effects (10 to 24 out of 100 people)	
Side effects and what to do	When to contact health care team
<p>What to do?</p> <p>To help prevent mouth sores:</p> <ul style="list-style-type: none"> • Take care of your mouth by gently brushing and flossing regularly. • Rinse your mouth often with a homemade mouthwash. • To make a homemade mouthwash, mix 1 teaspoonful of baking soda and 1 teaspoonful of salt in 4 cups (1L) of water. • Do not use store-bought mouthwashes, especially those with alcohol, because they may irritate your mouth. <p>If you have mouth sores:</p> <ul style="list-style-type: none"> • Avoid hot, spicy, acidic, hard or crunchy foods. • Your doctor may prescribe a special mouthwash to relieve mouth sores and prevent infection. • Talk to your health care team as soon as you notice mouth or lip sores or if it hurts to eat, drink or swallow. <p>Ask your health care team for the Oral Care (Mouth Care) pamphlet for more information.</p>	
<p>Liver problems</p> <p>(May be severe)</p> <p>Your health care team may check your liver function with a blood test. The liver changes do not usually cause any symptoms.</p> <p>What to look for?</p> <ul style="list-style-type: none"> • Rarely, you may develop yellowish skin or eyes, unusually dark pee or pain on the right side of your belly. This may be severe. <p>What to do?</p> <p>If you have any symptoms of liver problems, get emergency medical help right away.</p>	<p>Get emergency medical help right away</p>

Less Common Side Effects (10 to 24 out of 100 people)	
Side effects and what to do	When to contact health care team
<p>Fatigue</p> <p>What to look for?</p> <ul style="list-style-type: none"> Feeling of tiredness or low energy that lasts a long time and does not go away with rest or sleep. <p>What to do?</p> <ul style="list-style-type: none"> Be active. Aim to get 30 minutes of moderate exercise (you are able to talk comfortably while exercising) on most days. Check with your health care team before starting any new exercise. Pace yourself, do not rush. Put off less important activities. Rest when you need to. Ask family or friends to help you with things like housework, shopping, and child or pet care. 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). Avoid driving or using machinery if you are feeling tired. <p>Ask your health care team for the Fatigue pamphlet for more information.</p>	<p>Talk to your health care team if it does not improve or if it is severe</p>
<p>Pains or cramps in the belly</p> <p>What to look for?</p> <ul style="list-style-type: none"> Pain or cramps in your belly. Constipation and diarrhea can cause pain in your belly. <p>What to do?</p> <ul style="list-style-type: none"> If the pain is severe, gets worse or doesn't go away, talk to your health care team about other possible causes. 	<p>Talk to your health care team if it does not improve or if it is severe</p>

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:

- Irregular heartbeat, shortness of breath, chest pain, fainting spells or swelling in your legs, ankles and belly
- Pain, swelling and hardening of a vein in an arm or leg
- Feeling confused, having trouble with speaking, moving your arms or legs, or problems with balancing yourself
- Any sudden changes to your vision
- Severe belly pain, bloating or feeling of fullness and severe constipation
- Lower back pain with swelling, peeing less than usual, and unexpected weight gain
- Signs of an allergy such as itchiness, rash, swollen lips, face or tongue, chest and throat tightness, usually shortly after taking the drug
- New eye problems such as severe redness, irritation, pain, tearing, sensitivity to light or blurred vision
- Signs of bleeding such as bleeding from your gums, unusual or heavy nosebleeds, bruising easily or more than normal, black coloured stools (poo), blood in your stools (poo), red or pink coloured urine (pee), or coughing up red or brown coloured mucus

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: www.cancercareontario.ca/en/symptom-management

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.