

BORTDEXADARA(SC) 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?

BORTDEXADARA(SC) is the code name of your multiple myeloma treatment regimen.

A regimen is a combination of medications to treat cancer.

This regimen name is made up of one or more letters from the names of the 3 medications in your treatment. This regimen name also has letters that describe other information about how the medication is given.

Here are the names of the medications in this regimen, and what the other letters mean:

BORT = **BORT**ezomib

DEXA = **DEXA**methasone

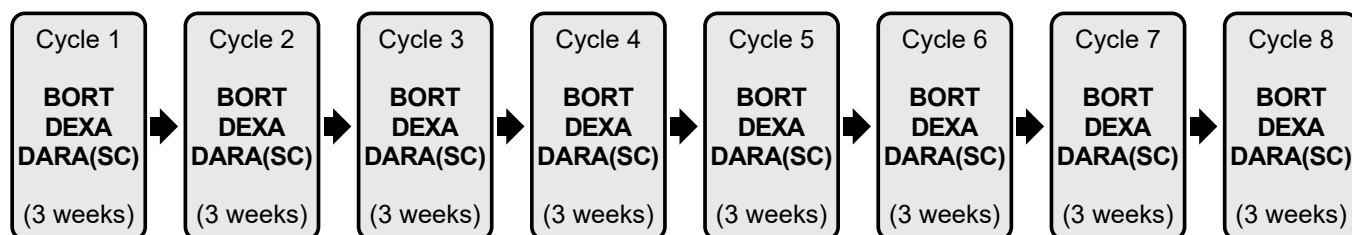
DARA = **DARA**tumumab

SC = subcutaneous, meaning one, or more, of the medications in this regimen are given as an injection under the skin

For most people, the first part of the treatment - BORTDEXADARA(SC) - lasts **24 weeks**. The treatment is divided into **8 cycles**. Each cycle is **3 weeks** long.

After BORTDEXADARA(SC) is completed, **daratumumab alone** continues **every 4 weeks**. Your health care team will tell you how many cycles you need.

Here is a picture of the schedule for BORTDEXADARA(SC) treatment:



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

Cycles 1 to 3:

During each 3-week cycle you will have bortezomib and daratumumab treatment on days 1, 8, and 15 at the hospital. You will take dexamethasone tablets on days 1, 8, and 15 at home.

Each cycle looks like this:

Day 1	2	3	4	5	6	7
Treatment Day: Go to the hospital for BORTDEXA-DARA (SC) treatment *Take your dexamethasone	No Treatment					
8	9	10	11	12	13	14
Treatment Day: Go to the hospital for BORTDEXA-DARA (SC) treatment *Take your dexamethasone	No Treatment					
15	16	17	18	19	20	21
Treatment Day: Go to the hospital for BORTDEXA-DARA (SC) treatment *Take your dexamethasone	No Treatment					

*By mouth, unless given through an IV (injected into a vein) at the hospital

Cycles 4 to 8:

During each 3-week cycle you will have bortezomib and daratumumab treatment on day 1, then bortezomib only on days 8 and 15 at the hospital. You will take dexamethasone tablets on days 1, 8 and 15 at home.

Each cycle looks like this:

Day 1	2	3	4	5	6	7
Treatment Day: Go to the hospital for BORTDEXA-DARA (SC) treatment *Take your dexamethasone	No Treatment					
8	9	10	11	12	13	14
Treatment Day: Go to the hospital for BORTDEXA treatment *Take your dexamethasone	No Treatment					
15	16	17	18	19	20	21
Treatment Day: Go to the hospital for BORTDEXA treatment *Take your dexamethasone	No Treatment					

*By mouth, unless given through an IV (injected into a vein) at the hospital

After 8 cycles of BORTDEXADARA(SC), **daratumumab alone** continues **every 4 weeks**.

For information on what to expect during the daratumumab treatment, refer to the [daratumumab \(subcut\) patient information sheet](#).



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.

You will have a blood test to check for hepatitis B before starting treatment. See the [Hepatitis B and Cancer Medications](#) pamphlet for more information.

How is this treatment given?

Bortezomib (BORT) and **daratumumab (DARA)** are given under your skin using a small needle (subcutaneous, SC or Subcut). This is done at the hospital.

Dexamethasone (DEXA) is given as tablets that you swallow.

- Swallow dexamethasone tablets whole. Take them with a full glass of water either during or just after a meal.
- If possible, take dexamethasone tablets in the morning right after eating breakfast.

On the days you get BORT & DARA, your health care team may ask you to take dexamethasone by mouth or may give you dexamethasone through an IV (injected into a vein) at the hospital. Follow the instructions given to you by your health care team about how to take your dexamethasone.

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

What other medications are given with this treatment?

To Prevent Infection from Herpes Zoster virus (shingles)

You may be given medication to take before your treatment to prevent infection from the Herpes Zoster virus.

- These are called anti-virals (such as acyclovir or valacyclovir)

To Prevent Infection from Bacteria

You may be given medication to take before your treatment to prevent infection.

- These are called antibiotics (such as trimethoprim-sulfamethoxazole).

To Prevent Hepatitis B Flare Ups

If you have ever been infected with hepatitis B, there is a risk that this treatment can cause it to flare up (come back). Tell your health care team if you have had hepatitis B. You may need to take medication to prevent a hepatitis B flare-up.

To Prevent an Allergic Reaction

You will be given medications before, and sometimes after, your treatment to help prevent allergic reactions before they start.

- There are different types of medications to stop allergic reactions. They are:
 - ◊ antihistamines (such as diphenhydramine or Benadryl®)
 - ◊ analgesics/antipyretics (such as acetaminophen or Tylenol®)
 - ◊ H2 blockers (such as ranitidine or famotidine)
 - ◊ corticosteroids (such as dexamethasone)
 - ◊ medications to help prevent breathing problems (such as montelukast or inhalers). These medications reduce the swelling or narrowing of your airways

To Prevent Nausea and Vomiting

You may 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 prochlorperazine (Stemetil®), ondansetron (Zofran®), granisetron (Kytril®) or others.

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 BORTDEXADARA(SC) 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 such as low or high blood pressure, bleeding problems, problems with the nerves in your hands and feet (numbness or tingling), heart, liver, lung or kidney problems, or any allergies.
- ✓ DO tell your health care team about any serious infections that you have now or have had in the past.
- ✓ DO check with your health care team before getting any vaccinations, surgery, dental work or other medical procedures.
- ✓ DO monitor your blood sugar regularly if you are taking any medications for diabetes. This treatment may cause changes in your blood sugar levels.
- ✓ DO talk to your health care team about your risk of getting other cancers and heart problems after this treatment.
- ✓ 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 NOT do this while on treatment



- ✗ DO NOT take any other medications, such as vitamins (especially **vitamin C**), over-the-counter (non-prescription) drugs or substances, or natural health products (such as **green tea** or any drinks or food that contains green tea) without checking with your health care team. **Green tea** and **vitamin C** supplements may make your treatment not work as well.
- ✗ DO NOT start any complementary or alternative therapies, such as acupuncture or homeopathic medications, without checking with your health care team.
- ✗ 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.
- ✗ DO NOT use tobacco products (such as smoking cigarettes or vaping) 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, traditional medicines 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
- other drugs and substances, such as cannabis/ marijuana (medical or recreational)
- natural health products such as vitamins, herbal teas, homeopathic medicines, and other supplements, or traditional medicines

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

- Daratumumab may affect certain lab tests, such as the test for matching your blood type. This may happen for up to 6 months after your last daratumumab dose. Be sure your health care team and person doing the blood test know you are receiving or have received this medication within 6 months.



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
- Traditional medicines
- Supplements such as Vitamin C
- Grapefruit juice
- Alcoholic drinks
- Tobacco
- All other drugs or substances, such as marijuana or cannabis (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 while you are on treatment. Talk to your health care team about which birth control options are best for you, and how long you should use them after your last treatment dose.
- Do not breastfeed while on this treatment. Talk to your health care team about how long to wait before you start breastfeeding after your last treatment dose, if this applies to you.

How should I safely store and handle the medications in this treatment?

Bortezomib and **daratumumab** are given and stored at the hospital.

Dexamethasone:

- Keep 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 tablets at home. Bring them to your pharmacy to be thrown away safely.

What are the side effects of this treatment?

The following table lists side effects that you may have when getting BORTDEXADARA(SC) treatment. The table is set up to list the most common side effects first and the least common last. You may not 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 BORTDEXADARA(SC) treatment.

Very Common Side Effects (50 or more out of 100 people)	
Side effect and what to do	When to contact health care team
Infection, low neutrophils (May be severe) When neutrophils are low, you are at risk of getting an infection more easily. Ask your health care team for the Neutropenia (Low white blood cell count) pamphlet for more information. When your immune system is weakened, bacteria, viruses, or fungi that would not normally be harmful may cause an infection. If you have had hepatitis, you may get this infection again when the immune system is weakened. This happens rarely.	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.

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 look for? • If you feel hot or unwell (for example if you have chills or a new cough), you must check your temperature to see if you have a fever. • Do not take medications that treat a fever before you take your temperature (for example, Tylenol® (acetaminophen), or Advil® (ibuprofen)). • Do not eat or drink anything hot or cold right before taking your temperature. • Yellowish skin or eyes, unusually dark pee or pain on the right side of your belly (hepatitis) 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. What to do? • Let your health care team know if you have had hepatitis. If your health care team has told you that you have low neutrophils: • Wash your hands often to prevent infection. • Check with your doctor before getting any vaccines, surgeries, medical procedures or visiting your dentist. • Keep a digital thermometer at home so you can easily check for a fever. If you have a fever: 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.	

Very Common Side Effects (50 or more out of 100 people)	
Side effect and what to do	When to contact health care team
Low platelets in the blood (May be severe) 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. What to look for? • Watch for signs of bleeding: ◦ bleeding from your gums ◦ unusual or heavy nosebleeds ◦ bruising easily or more than normal ◦ black coloured stools (poo) or blood in your stools (poo) ◦ coughing up red or brown coloured mucus ◦ dizziness, constant headache or changes in your vision ◦ heavy vaginal bleeding ◦ red or pink coloured urine (pee) What to do? If your health care team has told you that you have low platelets: • Tell your pharmacist that your platelet count may be low before taking any prescriptions or over-the-counter medication. • Check with your healthcare team before you go to the dentist. • Take care of your mouth and use a soft toothbrush. • Try to prevent cuts and bruises. • Ask your health care team what activities are safe for you. • Your treatment may have to be delayed if you have low platelets. Your health care team may recommend a blood transfusion. 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.	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.

Common Side Effects (25 to 49 out of 100 people)	
Side effect and what to do	When to contact health care team
Neuropathy (Tingling, numb toes or fingers) (May be severe) (More likely with BORT) What to look for? • Numbness or tingling of your fingers and toes may happen after starting treatment. • Sometimes it can be painful and feel like a burning sensation, which may be severe. What to do? • Talk to your health care team if you have symptoms of neuropathy. • Numbness may slowly get better after your treatment ends. 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.	Talk to your health care team, especially if you have trouble doing tasks like doing up buttons, writing, moving, or if you have severe pain or numbness.
Diarrhea (More likely with BORT) What to look for? • Loose, watery, unformed stool (poo) that may happen days to weeks after you get your treatment. What to do? If you have diarrhea: • Take anti-diarrhea medication if your health care team prescribed or told you to take it. • Do not eat foods or drinks with artificial sweetener (like chewing gum or 'diet' drinks), coffee and alcohol, until your diarrhea has stopped. • 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	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).

Common Side Effects (25 to 49 out of 100 people)	
Side effect and what to do	When to contact health care team
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. Ask your health care team for the diarrhea pamphlet for more information.	
Cough and feeling short of breath (May be severe) What to look for? • You may have a cough and feel short of breath. • Symptoms that often happen with a cough are: ◦ Wheezing or a whistling breathing ◦ Runny nose ◦ Sore throat ◦ Heartburn ◦ Weight loss ◦ Fever and chills • Rarely coughing and shortness of breath may be severe and may happen with chest pain, trouble breathing or coughing up blood. What to do? • 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?”. • 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. If you have a severe cough with chest pain, trouble breathing or you are coughing up blood, get medical help right away.	Talk to your health care team. If you are 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

Less Common Side Effects (10 to 24 out of 100 people)	
Side effect and what to do	When to contact health care team
Mild swelling What to look for? - You may have mild swelling or puffiness in your arms and/or legs. Rarely, this may be severe. What to do? To help prevent swelling: - Eat a low-salt diet. If you have swelling: - Wear loose-fitting clothing. - For swollen legs or feet, keep your feet up when sitting.	Talk to your health care team if it does not improve or if it is severe
Fatigue What to look for? - Feeling of tiredness or low energy that lasts a long time and does not go away with rest or sleep. What to do? - 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 doctor told you to drink more or less). - Avoid driving or using machinery if you are feeling tired. Ask your health care team for the Fatigue pamphlet for more information.	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
Constipation (May be severe) What to look for? • Having bowel movements (going poo) less often than normal. • Small hard stools (poo) that look like pellets. • The need to push hard and strain to have any stool (poo) come out. • Stomach ache or cramps. • A bloated belly, feeling of fullness, or discomfort. • Leaking of watery stools (poo). • Lots of gas or burping. • Nausea or vomiting. What to do? To help prevent constipation: • Try to eat more fiber rich foods like fruits with skin, leafy greens and whole grains. • Drink at least 6 to 8 cups of liquids each day unless your health care team has told you to drink more or less. • Be Active. Exercise can help to keep you regular. • If you take opioid pain medication, ask your health care team if eating more fibre is right for you. To help treat constipation: • 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. See the Constipation Pamphlet for more information.	Talk to your health care team if it does not improve or if it is severe
Headache, mild joint, muscle pain or cramps What to look for? • Mild headache. • New pain in your muscles or joints, muscle cramps, or feeling achy.	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? • Take pain medication (acetaminophen or opioids such as codeine, morphine, hydromorphone, oxycodone) as prescribed. • Read the above section: “What should I do if I feel unwell, have pain, a headache or a fever?” before taking acetaminophen (Tylenol®), ibuprofen (Advil®, Motrin®), naproxen (Aleve®) or Aspirin. These medications may hide an infection that needs treatment, or they may increase your risk of bleeding. • Rest often and try light exercise (such as walking) as it may help. Ask your health care team for the Pain pamphlet for more information.	
Nausea and vomiting (More likely with BORT) What to look for? • 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. What to do? To help prevent nausea: • It is easier to prevent nausea than to treat it once it happens. • If you were given anti-nausea medication(s), take them as prescribed, even if you do not feel like throwing up. • 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. If you have nausea or vomiting: • 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: ◦ nausea lasts more than 48 hours ◦ vomiting lasts more than 24 hours or if it is severe	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

Less Common Side Effects (10 to 24 out of 100 people)	
Side effect and what to do	When to contact health care team
Allergic reaction (May be severe) What to look for? • Fever, itchiness, rash, swollen lips, face or tongue, chest and throat tightness. • It may happen during or shortly after your treatment is given to you and may be severe. What to do? • Tell your nurse right away if you feel any signs of allergic reaction during or just after your treatment. • Talk to your health care team for advice if you have a mild skin reaction.	Get emergency medical help right away for severe symptoms.
Low blood pressure (More likely with BORT) What to look for? • You may feel tired, dizzy or light-headed. • You may have nausea (feeling like you need to throw up), vomiting or blurred vision. • You may faint (pass out). What to do? • Check your blood pressure often. Talk to your health care team to find out what a safe blood pressure is for you. • If you feel dizzy or unwell lay down right away so that you do not fall. Try to get up and move slowly only once you feel better. • Do not drive a motor vehicle or operate machinery if you feel dizzy. Your blood pressure may drop when the medication is being given to you. Let your health care team know right away if you start to feel dizzy or lightheaded.	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
Low Appetite, weight loss What to look for? • Loss of interest in food or not feeling hungry • Weight loss What to do? • Try to eat your favourite foods. • Eat small meals throughout the day. • You may need to take meal supplements to help keep your weight up. • Talk to your health care team if you have no appetite. See our loss of appetite pamphlet for more information.	Talk to your health care team if it does not improve or if it is severe
Too much or too little salt in your body What to look for? • Muscle spasms, cramping, weakness, twitching, or convulsions • Irregular heartbeat, confusion or blood pressure changes What to do? Get emergency medical help right away for severe symptoms.	Get emergency medical help right away for severe symptoms
Side effects of taking steroids (With dexamethasone) What to look for? • You may have: ◦ Weight gain (that sometimes may be seen in places such as the cheeks or the back of the neck) ◦ Weak muscles ◦ High blood sugar ◦ Upset stomach ◦ Problems with sleeping ◦ Changes in your mood • If you take steroids (such as dexamethasone) for many months or years, you may develop cataracts (clouding in your eyes) or osteoporosis (weak bones).	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? • Take your dexamethasone tablets in the morning with breakfast. • Eat a healthy, balanced diet and exercise regularly (talk to your health care team first to know what exercise is safe for you). • Do not have close contact (such as hugs and kisses) with people who are sick.	

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 pain or swelling in your arm or leg
- Sudden confusion, trouble speaking or difficulty moving your arms or legs
- Weakness on one side of your body
- Any changes in your vision
- Going pee less than usual and unusual weight gain
- Muscle twitching, severe weakness or tiredness
- Severe bloating or feeling of fullness
- Severe pain in the centre of your belly that may spread to your back
- Yellowish skin or eyes, unusually dark pee
- Seizure
- New problems with balance, memory problems, personality changes
- Irregular heartbeat or chest pain

For more information on how to manage your symptoms ask your health care provider, or visit:

<https://www.cancercareontario.ca/symptoms>.

Notes

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

August 2025 New patient medication information sheet

For more links on how to manage your symptoms go to www.cancercareontario.ca/symptoms.

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.