PACLitaxel-Trastuzumab Treatment

This document provides general information about your cancer treatment. It does not replace the advice of your health care professional. Always discuss your therapy with your health care team.

What medications are in this treatment?

- This treatment consists of PACLitaxel and Trastuzumab (Herceptin®).
- Refer to the medication information sheet for each drug for more information

What is this treatment for?

 PACLitaxel-Trastuzumab is a drug combination for treating HER2 receptor positive breast cancer.

What should I do before I have this treatment?

- Intravenous medications (dexamethasone, ranitidine and diphenhydramine) will be given to you to prevent allergic reactions. Instead of or in addition to intravenous dexamethasone, your doctor may prescribe dexamethasone tablets for you to take at home before your paclitaxel treatment. It is important that you take the dexamethasone tablets exactly as prescribed by your doctor.
- It is important to tell your oncologist about any other medical conditions you have, as some conditions may affect therapy with this treatment.

How will this treatment affect sex, pregnancy and breastfeeding?

- Since these medications may harm your baby if used during pregnancy, women who have not yet
 reached menopause should use effective forms of birth control while being treated. Do not use
 birth control pills. Please discuss this with your oncologist.
- If you become pregnant, tell your oncologist right away.
- Do not breastfeed while undergoing treatment.
- Also, if you plan to have children, discuss this with your oncologist before starting your first treatment, as chemotherapy may affect your fertility and your chances of having a baby in the future.

How is this treatment given?

- Your oncologist will determine how many treatment cycles you need depending on how you
 tolerate and respond to the chemotherapy. Each cycle lasts 3 weeks (21 days). You will receive
 trastuzumab and paclitaxel through a vein in your arm (IV) on first day (Day 1) of each cycle.
 Days 2 to 21 are rest days.
- Your oncologist may decide on an alternate schedule that could include weekly doses of paclitaxel with either weekly trastuzumab or trastuzumab every 3 weeks.
- You will have a blood test before each treatment to check if your blood counts are high enough for you to receive the next cycle of chemotherapy

What else do I need to know while on this treatment?

- Allergic reactions can occur during the infusion of paclitaxel. Symptoms of an allergic reaction include: lower back pain, flushing, shortness of breath, swelling, chest pain, dizziness, itching and rash. Your nurse will watch you closely, especially at the beginning of each treatment, when paclitaxel will be given at a slower rate. Tell your nurse if you are experiencing any type of discomfort as soon as they occur. You may experience these symptoms even after you leave the cancer centre. Please contact your oncologist if these symptoms occur. Please go to the nearest emergency department if you experience signs of an allergic reaction after you have been discharged.
- Trastuzumab, rarely, can have an effect on the function of the heart, which in some patients might
 cause shortness of breath, palpitations, fatigue and leg swelling. Your oncologist will order
 special heart tests before you begin treatment and while you are on treatment to follow your heart
 function. Tell your oncologist if you have had any heart problems and if you experience any of
 these symptoms.
- Medications in this regimen may make your periods heavier or lighter. Your periods may even stop completely. This may be permanent. You may develop symptoms of menopause such as hot flashes, vaginal dryness, mood swings and changes in sexual desire. Please discuss any concerns with your nurse or oncologist.
- Tell your oncologist, nurse, and pharmacist about any other prescription and non-prescription
 medications you are currently taking. Check with your oncologist, nurse or pharmacist before you
 start taking any new drugs, including herbal or alternative treatments. Also, tell other healthcare
 professionals you are seeing about the chemotherapy you are receiving.
- Due to increased risk of developing infections, check with your oncologist before having any vaccinations. Also check with your oncologist before any surgery or dental work.
- If you are taking ASA (Aspirin®, acetylsalicylic acid), please discuss this with your oncologist as this may interfere with your chemotherapy treatment. For headache, or occasional aches and pains, use acetaminophen (Tylenol®) instead of ASA.

What are the side effects of this treatment?

The table below lists some common or important side effects with this treatment. You may not have all of the side effects. Other side effects may occur. If you have any unusual or bothersome symptoms, discuss with your doctor.

Very Common Side Effects (50 or more out of 100 people	2)
Side effects and what to do	When to contact health care team
Hair thinning or loss	-
 Generally starts 2 to 3 weeks after the first injection. Use a gentle shampoo and a soft hairbrush. Avoid dyes, perms, bleaches and hair sprays. Protect your scalp from sun exposure and cold weather. This is expected. Your hair usually grows back after your chemotherapy is finished, but hair loss may be permanent in some cases. 	
 Muscle or joint pain May happen 2-8 days after each Paclitaxel infusion and may resolve within 4 to 7 days. Take 1-2 Acetaminophen tablets every 4 hours if needed for pain. Contact your oncologist if this becomes bothersome. 	Contact your health care team if no improvement or if severe
 May happen a few days after your treatment Limit hot, spicy, and fried foods; limit foods and drinks with caffeine. Drink plenty of fluids. Phone your doctor if diarrhea lasts longer than 24 hours. See Diarrhea pamphlet.* 	Contact your health care team if no improvement or if severe
 Tiredness or weakness; Lack of energy May increase with the number of cycles given. Eat well-balanced meals. Some mild exercise, such as walking, may help. Rest when feeling tired or weak. Don't drive a motor vehicle or operate machinery. Your energy level will improve over time. However, it may take a few months for the tiredness to go away even after your chemotherapy is finished. 	Contact your health care team if no improvement or if severe
 Flu-like symptoms (usually mild) - fever, chills, headache, muscle & bony aches, cough, and stuffy nose This may happen shortly after your Trastuzumab treatment. These symptoms usually disappear on their own. Take Acetaminophen (e.g. Tylenol®) 1 or 2 tablets every 4 hours, as needed for aches and pains. If the pain or coughing continues and is bothersome after 2 to 4 days, call your oncologist or nurse. 	Contact your health care team if no improvement or if severe

Very Common Side Effects (50 or more out of 100 people	e)
Side effects and what to do	When to contact health care team
 Sores in the mouth or the lips May start a few days after treatment begins. Maintain good mouth hygiene. Brush teeth often with a soft toothbrush. 	Talk to your health care team as soon as possible
 Avoid hot, spicy and acidic foods. Avoid commercial mouthwashes. See Mouth Care pamphlet.* Check with your oncologist or nurse as soon as you notice sores on lips or tongue and in the mouth. 	
 Signs of infection, for example, fever, chills, cough, sore throat The risk of infection is greatest between days 8 to 21. Limit contact with people who are sick or have colds. Wash your hands often. Phone your oncologist or go to the closest emergency room right away if you have a fever* *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 (or 100.4°F) or higher for at least one hour. While you are getting chemotherapy treatments: Keep a digital thermometer at home and take your temperature if you feel hot or unwell (for example, chills). Avoid taking medications that treat a fever before you take your temperature (for example, Tylenol®, acetaminophen, Advil® or ibuprofen) as they may hide a fever. Do not eat or drink anything hot or cold right before taking your temperature. Check with your doctor before getting any vaccines, surgeries, medical procedures or visiting your dentist. 	Get emergency medical help right away
Chills or fever during infusion	Get emergency medical help right
 More common during the first trastuzumab infusion. Your treatment may be given more slowly and drugs may be given to you to treat the reaction. If you develop this reaction, you may also receive drugs before your next cycle of trastuzumab to prevent this. Tell your nurse or oncologist immediately if you have a reaction during the treatment. 	away
Numbness, tingling and burning sensation in hands and feet	Contact your

Very Common Side Effects (50 or more out of 100 people)	
Side effects and what to do	When to contact health care team
 This sometimes starts after a few treatments Usually mild and temporary, gradually goes away. Be careful when handling items that are sharp, hot or cold. Check with your oncologist or nurse if this is bothersome and affecting your daily living. 	health care team if no improvement or if severe

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.