



Yorkshire Cancer Network

Chemotherapy information for patients



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What is chemotherapy?

Chemotherapy is a type of cancer treatment. Other treatments include surgery, radiotherapy, immunotherapy or hormone treatment. Some people need to have more than one type of treatment, for example, surgery followed by chemotherapy.

Chemotherapy is treatment with drugs which destroy or control cancer cells. These may be given as tablets, or by an injection or drip into a vein. Sometimes, chemotherapy may be given in an injection under the skin, into the muscle or into another part of the body.

There are many different chemotherapy drugs which may be used on their own or with other drugs.

How does chemotherapy work?

Chemotherapy drugs stop cancer cells from growing and spreading. The cancer cells become damaged and eventually die. Because different drugs damage the cancer cells in different ways, a combination of drugs is often used.

We will usually give you chemotherapy as several courses of treatment so it can kill as many cancer cells as possible. Depending on the drugs that you are given, each course can last from a few minutes to several days. This may be followed by a rest period which allows your body to recover from any side effects of the treatment.

Unfortunately, chemotherapy drugs can affect normal cells in your body as well, and this sometimes causes unpleasant side effects. However, normal cells regrow and heal quickly so the damage is only temporary. Most side effects disappear completely when the treatment is over.

Will I have to come into hospital for my chemotherapy treatment?

We can give some chemotherapy drugs in the outpatient department, but for other drugs, you may need to stay in hospital for a short time.

How many treatments will I need?

This depends on the sort of cancer you have and how your body reacts to treatment. We can sometimes work out how many treatments you will need at the beginning, but usually we need to work it out as the treatment goes on.

We will ask you to sign a consent form before we start treatment to say that we have told you about the treatment and its possible side effects.

What about side effects?

It's important to remember that not everyone gets side effects. Different drugs have different side effects and each person reacts in a different way.

Some parts of the body, where normal cells grow quickly,

are more affected by chemotherapy than others. These are the mouth, skin, hair, bone marrow and digestive system.

The effects of chemotherapy on bone marrow

The bone marrow is the part of the body where blood cells are made. Red blood cells give you energy, white blood cells fight infections and platelets help the blood clot, to prevent bleeding. Chemotherapy may slow down the production of these healthy cells, but this is temporary.

A blood test, called a Full Blood Count (FBC), is done before each treatment to make sure that you have enough healthy blood cells. Quite often, the bone marrow needs more time to recover so your next treatment may need to be postponed or the dose changed.

What will happen if my blood count falls?

White cells

In most cases, your white cells will probably be at their lowest about 7 to 14 days after chemotherapy, so we may ask you for another blood count around this time.

While your white cell count is low, you are more likely to get an infection, and could become ill very quickly. It is **very important** to contact your hospital team if you think you have an infection so they can give you antibiotics as soon as possible.

Please see the information on page 12 'When to contact us'.

Red cells

If you don't have enough red cells, you will be anaemic which may make you tired and short of breath. Sometimes a blood transfusion is necessary to correct this.

Platelets

If the number of platelets in your blood falls, you may start to bruise or bleed more easily. You may need a transfusion of platelets to help this.

What are the other common side effects?

The next few pages describe the most common side effects. We will tell you about any special side effects of your treatment. If you notice anything which you think the chemotherapy has caused, but don't find it listed here, please tell one of your hospital team.

Sickness

People react differently to chemotherapy. Some people feel sick after treatment, some people are sick and others have no problems at all.

Some chemotherapy drugs do cause people to feel sick or be sick. If you are being treated with this sort of drug, we will give you antiemetics (drugs which prevent sickness) as part of the treatment. We may also give you some to take home in case you feel sick later.

It is sensible to eat normally before and after treatment, but listen to your body and don't force yourself to eat if you feel sick or are being sick. But it is important to drink at least two to three litres (five pints) of fluid a day.

If you feel sick or are sick after treatment, please tell us because we can change your anti-sickness drugs - there are lots of different types. Other things can help you to feel better, for example:

- get enough rest;
- change what you eat; try fizzy drinks, ginger and tomato soup;
- try wearing travel-sickness bands;
- try hypnotherapy or relaxation; and
- simply do things you enjoy.

Taste changes and altered appetite

Chemotherapy can make some foods taste different. Many people go off tea and coffee and some people get a metallic taste or food cravings. All this might affect your normal diet and make you lose or put on weight. If you get an unpleasant taste in your mouth it may help if you:

- chew celery, fresh pineapple or low-sugar gum;
- suck ice lollies; or
- drink herbal tea or ginger drinks.

Your tastes should go back to normal when the treatment has finished.

During your treatment, try to eat a well-balanced diet. Small regular meals will probably make you feel better than if you eat a lot at once. The smell of cooking may make you feel sick during chemotherapy; your food will taste better if someone else has cooked it. Some people prefer to cook a few meals at once and freeze them. If you have a problem eating, ask us for advice. We could give you some nutritious drinks or food supplements, or refer you to a dietitian.

Sore mouth

It is important that you keep your mouth clean and moist. This helps prevent:

- infection;
- problems with your teeth;
- mouth ulcers; and
- fungal infections such as thrush.

After cleaning your teeth with a fluoride toothpaste, rinse your mouth well with water to remove debris. Please avoid using commercial mouthwashes. We can give you an antibacterial mouthwash if needed. A soft, child's toothbrush is useful for regular brushing. If you have false teeth, you should clean them after every meal, and you may be more comfortable without them if this is possible. A lip salve will help to keep your lips moist.

Hair loss

Not all chemotherapy drugs cause hair loss. If this does happen, your hair will begin to grow back four to six weeks after your treatment has finished. At first, your new hair may be more curly, thicker or finer, or be a slightly different colour.

Chemotherapy can make your hair brittle and dry, so it's a good idea to use a mild or baby shampoo. Do not have your hair set, permed or coloured with products that contain ammonia. Use hairdryers on a cool heat and do not use heated tongs or hot brushes. You can gently brush or comb your hair with a wide-toothed comb every day, but not too often. You may be more comfortable wearing a hairnet or turban at night.

We may offer you 'scalp cooling' during treatment, which

can make hair loss less likely. This only makes a difference with some types of chemotherapy. We will answer any questions you have about this.

Wigs are available on the NHS, but there may be a prescription charge. It is a good idea to choose a wig while you still have your own hair, so we can match your own style and colour more easily. Your chemotherapy nurse will be able to arrange this for you.

You can wear hats, caps, turbans and scarves to cover thinning hair, and they are usually cooler to wear than a wig. Some hospitals can provide these.

Fatigue (extreme tiredness)

Most people who are treated with chemotherapy suffer fatigue at some time or another. This is normal.

This fatigue can be caused by the chemotherapy itself, or by its side effects. The fatigue can be severe, and varies from person to person. Some people can carry on normally. Others find that they have to take life more slowly during treatment. You may have to work part time, or give up work temporarily, cut down on social activities and get help with the housework. Gentle exercise can be helpful. You also need to make sure you get enough rest.

There are many things you can do to reduce your fatigue, and you can discuss these with the nurse who is caring for you.

Sore veins/Phlebitis

Some chemotherapy drugs may cause tenderness or soreness in your arm. Please let your nurse know if you

experience any pain or discomfort when you are having your treatment.

Extremely rarely, however, a small amount of the chemotherapy may leak out of the vein into the surrounding tissue. This is known as Extravasation. It is important that you let your hospital team know, as soon as possible, if you develop any pain or redness around the area you had your injection at any time after your treatment. Simple procedures can then be followed to reduce any damage

Reaction to sunlight

Chemotherapy drugs can make you more likely to get sunburnt, both during treatment and for some months after. Use factor 15 (or higher) sun cream or sun block when you are in the sun for any length of time. You can also protect your skin by covering up with loose-fitting clothing, wearing a hat or just trying to stay in the shade. Do not use a sun bed while you are having chemotherapy.

Sex and fertility

Side effects of treatment may mean that your desire for sex is reduced. When your treatment has finished, your energy levels should return to normal.

Women: Women often find that their periods become irregular or stop during treatment. Some women remain fertile and it is important that you do not become pregnant during chemotherapy, and for at least one year afterwards, because it may damage the developing baby. It is **very important** that you use contraception, and the best methods at this time are barrier methods such as condoms or the cap. Condoms will also reduce the risk of infection. Check with your hospital team if you are worried about this.

Chemotherapy may make you less fertile. This may be temporary or permanent, depending on your treatment and age. The younger you are, the more likely it is that your periods will go back to normal and you may still be able to get pregnant. If you are close to the menopause, your periods may stop permanently.

If you are planning to become pregnant in the future, you may want to discuss this with your hospital team before your chemotherapy starts.

Your vagina may become more dry because of chemotherapy. This can make sex difficult or painful. Using a lubricant, like K.Y. Jelly or Replens, inside the vagina before sex should make it easier.

It is best not to breast-feed while you are having chemotherapy because the drugs may be passed on to the baby. If you are worried, please discuss this with your hospital team.

Men: Some chemotherapy drugs can reduce fertility. If this is likely, we may discuss storing your sperm with you before treatment. We will store your sperm before your treatment begins. You may remain fertile during the early part of your treatment. It is important that you do not father any children during treatment, and for one year afterwards. This is because your sperm may not be formed properly which could damage your baby.

You or your partner should use effective contraception. You can discuss this with your hospital team.

Mood changes

You may notice a change in your moods, such as becoming more anxious or easily upset by things. Many people find themselves worrying about whether or not the treatment is working. These feelings are normal during chemotherapy, and may be harder to cope with because you feel tired and your normal routine has changed. Talking about your moods and feelings with close family or friends can be very helpful for you (and for them!).

Sometimes, it is useful to talk to other patients who have had a similar treatment to yourself. Nurses, psychologists and counsellors will also support you. Your hospital staff will be able to tell you about this.

General advice

Vaccinations

Please consult your chemotherapy nurse or consultant for the latest advice on having vaccinations, including flu jabs.

Dentist

It is important to keep your mouth, teeth and gums in good condition during chemotherapy to prevent infection. It is best not to have major dental work, for example, having teeth taken out, when your blood count is low. Please discuss this first with your hospital team.

Alcohol

You can carry on drinking a moderate amount of alcohol if you feel like it. Very few chemotherapy drugs react badly to alcohol but drinking may make you feel sick.

Holidays and travel insurance

If you are planning a holiday, please discuss this in plenty of time with the hospital team because they may have to change your treatment. It is important to discuss any vaccinations for foreign holidays with the doctor. **Do not** have any 'live virus' vaccinations while you are on chemotherapy. These include polio, measles, rubella, MMR, BCG (tuberculosis), yellow fever and oral typhoid.

You will need to tell the travel insurance company about your illness and treatments. (They may ask for a letter from your doctor to say that you are well enough to travel.) Your own hospital may have information about companies which offer travel insurance for people with cancer

Driving

You can usually carry on driving as normal as long as you feel well enough to do so. However, your insurance company might like to know about any changes to your health and the treatment you are having.

Occasionally, it may be necessary to contact the DVLA. Your doctor can advise you on this.

When to contact us

Please contact us **immediately** if any of these things happen.

- High temperature or fever. If you feel hot, cold, shivery or otherwise unwell, please check your temperature with a thermometer (a normal temperature is 37°C or 98.4°F). If your temperature is 38°C (100°F) or higher, please ring your hospital team **immediately**. Do not take anything (even paracetamol) to bring your temperature down until you have sought advice from your hospital team. This could hide any symptoms of infection and make it difficult to work out what was wrong with you.
- Feeling very unwell or having symptoms of infection, even if you don't have a temperature.
- Severe sickness or a sore mouth which prevents you from swallowing or keeping drinks down.
- Severe diarrhoea.
- Sore veins.
- Bruises or small blood spots which appear on your body.
- Blood when you go to the toilet, or bleeding elsewhere which doesn't stop easily.
- A headache which doesn't get better with paracetamol.

Phone numbers of cancer organisations

CancerBACUP

0808 800 1234 (open from 9am to 7pm, Mon to Fri)

www.cancerbacup.org.uk

Information is also available in other languages

Macmillan Cancerline

0808 808 2020 (open from 9am to 6pm, Mon- Fri)

www.macmillan.org.uk

Breast Cancer Care

0808 800 6000 www.breastcancercare.org.uk

Colon Cancer Concern

08708 506050 www.coloncancer.org.uk

British Colostomy Association

0118 939 1537 www.bcass.org.uk

Macmillan Cancer Relief (York)

01904 651 700

Black Mental Health Resource (Leeds) English, Punjabi, Urdu

0113 237 4229

The Carers Centre (Leeds)

0113 246 8338 www.carers.org

Ovacom (ovarian cancer support)

020 7380 9589 www.ovacom.org.uk

National Cancer Alliance

0186 579 3566 www.nationalcanceralliance.co.uk/

Roy Castle Lung Foundation

0800 358 7200 www.roycastle.org/

Prostate Cancer Charity

0845 300 8383 www.prostate-cancer.org.uk/

Cancer Research Campaign

020 7061 8355 www.cancerhelp.org.uk

Robert Ogden Macmillan Centre

0113 206 6498 or 0113 206 6499

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