

For the Patient: GIAVPG

Other Names: First-line palliative chemotherapy for advanced gallbladder and bile duct cancer using Gemcitabine and Cisplatin

GI = **G**astro**I**ntestinal

AV = Advanced

PG = Cisplatin, Gemcitabine

ABOUT THIS MEDICATION

What are these drugs used for?

 Cisplatin and gemcitabine are drugs given to treat advanced cancer of the gallbladder and bile duct.

How do these drugs work?

• Cisplatin and gemcitabine work by interfering with dividing cells and preventing an increase in the number of cancer cells.

INTENDED BENEFITS

- This therapy is being given to destroy and/or limit the growth of cancer cells in your body. This treatment may improve your current symptoms, and delay the onset of new symptoms.
- It may take several treatments before your doctor can judge whether or not this treatment is helping.

TREATMENT SUMMARY

How are these drugs given?

- Cisplatin and gemcitabine are given directly into the vein (IV).
- You will receive these two drugs at the clinic by a chemotherapy nurse. Each treatment will take about one and a half hours. Your first treatment will probably take longer, as the nurse will review information on the chemotherapy drugs with you.
- The treatment is repeated each week for 2 weeks in a row, followed with a 1 week rest period. This 3 week or 21 day period of time is called a "cycle". The cycle is repeated as long as you are benefiting from treatment and not having too many side effects, as determined by your oncologist.

The calendar on the following page shows how the medications are given each 3 week cycle.

C	DATE	TREATMENT PLAN	
Ċ		► Week 1 → Cisplatin + Gemcitabine IV day 1	
E		► Week 2 → Cisplatin + Gemcitabine IV day 8	
1		► Week 3 → no treatment	

C	DATE	TREATMENT PLAN	
Ċ		► Week 1 → Cisplatin + Gemcitabine IV day 1	
E		► Week 2 → Cisplatin + Gemcitabine IV day 8	
2		► Week 3 → no treatment	

Treatment may continue for as long as you are benefiting from treatment and not having too many side effects.

What will happen when I get my drugs?

A **blood test** is done each cycle, on or before the first day of each cycle. The dose and timing of your chemotherapy may be changed based on your blood counts and/or other side effects.

Your doctor may ask you to **drink water** on the morning of your treatment (2-3 cups). Following your treatment your doctor may ask you to drink plenty of liquids (8-12 cups a day). This helps prevent kidney problems.

SIDE EFFECTS AND WHAT TO DO ABOUT THEM

Unexpected and unlikely side effects can occur with any drug treatment. The ones listed below are particularly important for you to be aware of as they are directly related to the common actions of the drugs in your treatment plan.

Your doctor will review the risks of treatment and possible side effects with you before starting treatment. The chemotherapy nurse will review possible side effects of the drugs and how to manage those side effects with you on the day you receive your first treatment.

SERIOUS SIDE EFFECTS	MANAGEMENT
DURING TREATMENT	
Allergic reactions may rarely occur. Signs of an allergic reaction are dizziness, confusion and wheezing. This reaction may occur immediately or several hours after receiving cisplatin. This reaction can occur after the first dose of cisplatin or after many doses of cisplatin.	Tell your nurse if this happens while you are receiving cisplatin or contact your oncologist immediately if this happens after you leave the clinic.
Cisplatin burns if it leaks under the skin.	Tell your nurse or doctor <i>immediately</i> if you feel burning, stinging, or any other changes while the drug is being given.
Nausea and vomiting may occur after your treatment and may last for 24 hours. Nausea may last longer for some patients (i.e. delayed nausea and vomiting).	You may be given a prescription for an antinausea drug(s) to take before your chemotherapy treatment and/or at home. It is easier to prevent nausea than treat it once it has occurred, so follow directions closely. • Drink plenty of liquids. • Eat and drink often in small amounts. • Try the ideas in <i>Practical Tips to Help Manage Nausea</i> .* Your doctor may manage delayed nausea and vomiting differently. Be sure to let your doctor know if you experience this.
Your white blood cells will decrease 7 – 10 days after your treatment. They usually return to normal 3 weeks after your last treatment. White blood cells protect your body by fighting bacteria (germs) that cause infection. When they are low, you are at greater risk of having an infection.	 To help prevent infection: Wash your hands often and always after using the bathroom. Take care of your skin and mouth. Call your doctor <u>immediately</u> at the first sign of an infection such as fever (over 100°F or 38°C by an oral thermometer), chills, cough, or burning when you pass urine.

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SERIOUS SIDE EFFECTS DURING TREATMENT	MANAGEMENT
Your platelets may decrease during or after your treatment. They will return to normal after your last treatment. Platelets help to make your blood clot when you hurt yourself. You may bruise or bleed more easily than usual.	 To help prevent bleeding problems: Try not to bruise, cut, or burn yourself. Clean your nose by blowing gently. Do not pick your nose. Avoid constipation. Brush your teeth gently with a soft toothbrush as your gums may bleed more easily. Maintain good oral hygiene. Some medications such as ASA (e.g. ASPIRIN®) or ibuprofen (e.g. ADVIL®) may increase your risk of bleeding. Do not stop taking any medication that has been prescribed by your doctor (e.g. ASA for your heart). For minor pain, try acetaminophen (e.g. TYLENOL®) first, but occasional use of ibuprofen may be acceptable.

OTHER SIDE EFFECTS DURING TREATMENT	MANAGEMENT
Pain or tenderness may occur where the needle was placed. Sore mouth may occur a few days after	Apply cool compresses or soak in cool water for 15 – 20 minutes several times a day. • Brush your teeth gently after eating and at
treatment. Mouth sores can occur on the tongue, the sides of the mouth or in the throat. Mouth sores or bleeding gums can lead to an infection.	 bedtime with a very soft toothbrush. If your gums bleed, use gauze instead of a brush. Use baking soda instead of toothpaste. Make a mouthwash with ½ teaspoon baking soda or salt in 1 cup warm water and rinse several times a day. Try soft, bland foods like puddings, milkshakes and cream soups. Avoid spicy, crunchy or acidic food, and very hot or cold foods. Try ideas in Food Ideas to Try with a Sore Mouth*.
A flu-like illness may occur shortly after your treatment. You may have fever, chills, headache, muscle and joint aches. Flu-like symptoms usually disappear on their own.	 Take acetaminophen (e.g. TYLENOL®) every 3 – 4 hours if needed. Fever and chills, which occur more than 48 hours after treatment, may be signs of an infection. They should be reported to the doctor immediately.
Skin rash may occur after treatment with gemcitabine. It is usually mild and is found on the arms, legs, chest, back or stomach. It may or may not be itchy.	Apply hydrocortisone cream 0.5% sparingly 3 – 4 times a day.
Diarrhea may occur.	 To help diarrhea: Drink plenty of liquids. Eat and drink often in small amounts Eat low fibre foods & avoid high fibre foods as outlined in Food Ideas to Help Manage Diarrhea*.
Swelling of hands, feet or lower legs may occur if your body retains extra fluid.	If swelling is a problem:Elevate your feet when sitting.Avoid tight clothing.
Tiredness and lack of energy may occur.	 Do not drive a car of operate machinery if you are feeling tired. Try the ideas in the handout titled Fatigue/Tiredness*.
Hair loss sometimes occurs. Your hair will grow back once you stop treatment with gemcitabine. Colour and texture may change.	 Use a gently shampoo and soft brush Care should be taken with use of hair spray, bleaches, dyes and perms. If hair loss is a problem, refer to Resources for Hair Loss and Appearance Changes*.

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INSTRUCTIONS FOR THE PATIENT

- Tell your doctor if you have ever had an unusual or allergic reaction to cisplatin before receiving treatment.
- The **drinking of alcohol** (in small amounts) does not appear to affect the safety or usefulness of cisplatin or gemcitabine.
- Your doctor may ask you to take a **hearing test** before and at various times during your treatment with cisplatin. This helps to detect hearing problems.
- Cisplatin may cause **sterility** in men and **menopause** in women. If you plan to have children, discuss this with your doctor before being treated with cisplatin.
- Cisplatin and gemcitabine may damage sperm and may harm the baby if used during pregnancy. It is best to use **birth control** while being treated with cisplatin and gemcitabine. Tell your doctor right away if you or your partner becomes pregnant. Do not breast feed during treatment.
- Tell doctors or dentists that you are being treated with gemcitabine before you receive any treatment from them.

Medication Interactions

Other drugs such as warfarin (COUMADIN®) may interact with gemcitabine. Other drugs such as some antibiotics given by vein (e.g. tobramycin, vancomycin), and furosemide (LASIX®), phenytoin (DILANTIN®) and pyridoxine may interact with cisplatin. Tell your doctor if you are taking these or any other drugs as you made need extra blood tests or your dose may need to be changed.

Check with your doctor or pharmacist before you start taking any new drugs.

THE FOLLOWING INFORMATION IS VERY IMPORTANT

SEE YOUR DOCTOR OR GET EMERGENCY HELP IMMEDIATELY IF YOU HAVE:

- Signs of an **infection** such as fever (over 100°F or 38°C by an oral thermometer); chills; cough; pain or burning when you pass urine.
- Signs of **bleeding problems** such as black tarry stools; blood in urine; pinpoint red spots on skin.
- Signs of an **allergic reaction** (rare) soon after a treatment including dizziness, fast heart beat, face swelling or breathing problems.
- Signs of **lung problems** such as shortness of breath or difficulty breathing.
- Signs of a **stroke** such as sudden onset of: severe headache, eyesight changes, slurred speech, loss of coordination, weakness or numbness in arm or leg.
- Signs of a **blood clot** such as tenderness or hardness over a vein, calf swelling and tenderness, sudden on set of cough, chest pain or shortness of breath.
- Signs of heart problems such as fast or uneven heart beat.
- Seizures or loss of consciousness.
- Uncontrolled nausea, vomiting or diarrhea.

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SEE YOUR DOCTOR AS SOON AS POSSIBLE (DURING OFFICE HOURS) IF YOU HAVE:

- Muscle weakness.
- Signs of anemia such as unusual tiredness or weakness.
- Signs of liver problems such as yellow eyes or skin, white or clay-coloured stools.
- Signs of kidney problems such as lower back or side pain, swelling of feet or lower legs.

CHECK WITH YOUR DOCTOR IF ANY OF THE FOLLOWING CONTINUE OR BOTHER YOU:

- Easy bruising or bleeding.
- Redness, swelling, pain or sores where the needle was placed.
- Redness, swelling, pain or sores on your lips, tongue, mouth or throat.
- · Ringing in your ears or hearing problems.
- Skin rash and/or itching.
- Excessive drowsiness.
- Aches and pains.
- Numbness or tingling in feet or hands or painful leg cramps.

If you experience symptoms or changes in your body that have not been described above but worry you, or if any symptoms are severe, contact:						
at telephone number:						

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