Managing Chemotherapy Side Effects

There are many different chemotherapy medications and some have specific side effects. Not everyone having chemotherapy will experience side effects, but most people experience some. This information sheet contains a range of the most common side effects that are associated with chemotherapy medications.

Your doctor may have prescribed some oral chemotherapy medication (in the form of tablets or capsules) to be taken at home.

While you will need to be reviewed by your treating team at regular intervals, it is important that a health professional has explained to you how and when to take your medication. You should have also received printed information to explain this, as well as:

- how to recognise the possible side effects of the medication
- how to prevent these side effects at home
- when to contact your treating team or attend hospital.

Your doctor may prescribe other medications to help with these side effects. There are also many things that you can do to help yourself manage the side effects of chemotherapy medications; some of which will be explained in this fact sheet.

Urgent side effects

Some chemotherapy side effects can be very serious. It is important that you do not wait until the next morning (or after the weekend) to seek assistance. You must contact your treating team, or go to your nearest emergency department (outside business hours), immediately if you develop any of the following symptoms:

- chest pain
- a temperature of 38°C or higher
- chills, shivers or shakes
- gum or nose bleeds, or unusual bleeding (if bleeding doesn't stop after ten minutes of ice and pressure)
- pain, burning or blood in urine
- vomiting (that continues despite taking your lanti-sickness medication)
- diarrhoea (e.g. four or more bowel movements than usual and/or diarrhoea at night)
- difficulty breathing



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Neutropenia and infection

Neutrophils are a type of white blood cell, which help to fight infections or germs. Chemotherapy can cause the neutrophil count in your blood to decrease. When it becomes too low, neutropenia occurs and you have less of ability to fight infections.

If you develop a fever (temperature of 38°C or above) or if you feel unwell, **it is very important to get immediate medical attention**. It could be lifethreatening and should be taken very seriously.

You must contact your hospital team or go to your nearest emergency department immediately if you develop any of the following symptoms:

- a temperature of 38°C or higher
- chills, shivers or shakes
- pain, redness, heat, swelling or drainage from a wound/around a venous access device
- pain, burning or blood in urine
- diarrhoea (with fever)
- sore throat (with fever)

Preventing infection

The following are ways that you can help to reduce your exposure to bacteria and viruses while you have low white blood cells:

- Care for venous access devices (e.g. PICCs, ports, Hickman® or central lines) as directed.
- Avoid crowded places (e.g. buses, cinemas) until your neutrophil count has improved.
- Try to avoid close contact with people who have coughs and colds, and anyone who has been in contact with infectious diseases, such as shingles, chicken pox or measles.
- Stay away from construction and building sites where there is a lot of dust.
- Always wash your hands before preparing food, eating, and after using the bathroom, sneezing etc.
- Have a daily shower.
- Try to prevent any injuries as broken skin provides an entry point for bacteria (i.e. avoid using a razor or squeezing pimples).
- Clean cuts, scrapes, sores and/or stings immediately with warm water, soap, and antiseptic.
- Avoid rectal suppositories or enemas. If constipated,

- speak to your treating team about the best way to manage it.
- Speak to your treating team before you have any dental treatment, and let your dentist know that you are receiving chemotherapy/anti-cancer treatment.
- Effective mouth care is important in preventing dental cavities and infection. Brush your teeth with a soft toothbrush and rinse your mouth with a non-alcoholic-based mouthwash after eating, smoking and before bedtime.
- Check with your doctor before you receive any immunisations.
- Wear protective gloves and covered footwear when working outside, and avoid contact with soil (e.g. potting mix)
- Avoid handling pet poo or cleaning fish tanks.

Food safety

As your body may have less of an ability to fight infections, it is important to ensure that the foods you are eating are safe. The following will help to reduce your risk of contracting foodborne illnesses and other infections.

- Wash your hands before eating and after handling food.
- Clean chopping boards and kitchen counters thoroughly.
- Cook foods thoroughly
- Thaw frozen foods in the refrigerator (do not leave to thaw at room temperature).
- Thoroughly wash fresh fruit and vegetables.
- Wash knives and cutting boards after handling uncooked foods.
- Avoid takeaway meals.
- Avoid shell fish, prawns, oysters, sushi, pate and deli meats.
- Avoid soft cheeses, such as feta, brie, camembert and blue vein.
- Avoid reheating food; however, if food does need to be reheated, it should be heated until it is hot throughout.

If your ability to fight infection is severely affected, your treating team may ask you to follow stricter guidelines than those above.

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Chemotherapy-induced nausea and vomiting (CINV)

Nausea and vomiting are some of the most common and distressing side effects of chemotherapy. Your doctor will prescribe anti-sickness medications to help prevent these symptoms—some are given before the chemotherapy treatment, and some you take home with you.

You should take these regularly as prescribed, even if you are not feeling sick. It is better to stop CINV before it starts.

If you still experience nausea or vomiting after taking these medications, please tell your doctor or nurse as there might be other medications that could be more effective for you.

As well as medications, you may find the following tips helpful to manage nausea and/or vomiting:

 Avoid eating or preparing food when feeling sick. If possible, let someone else prepare meals.

- Eat small, frequent meals instead of three large meals a day, as these may be easier to digest.
- Eat and drink slowly, and chew your food well.
- Avoid overly sweet, fried, fatty or spicy foods, as well as foods with a strong smell. If the smell of hot food makes you feel sick, try eating cold or warm food.
- Ginger and/or peppermint may help with nausea.
 Try ginger biscuits, ginger beer, or peppermints/ peppermint tea
- · Avoid drinking too much before a meal.
- Avoid alcohol and excess amounts of coffee.
- Try using travel sickness bands, as some people find these helpful.

Mouth care

It is common to experience a sore or dry mouth and throat during chemotherapy treatment. Soreness and ulceration of the lining of the mouth are known as mucositis/ stomatitis and can be very painful. Damage to the lining of the mouth is usually temporary, and most side effects will disappear once the chemotherapy has finished and the numbers of white blood cells have returned to normal.

The likelihood of developing a sore mouth varies. Your treating team will be able to tell you how likely this is with your type of chemotherapy. If you are receiving both chemotherapy and radiotherapy to the head and neck area the risk increases.

There is a lot you can do to help keep your mouth healthy. Look in your mouth each day for any signs of redness, swelling, sores, white patches or bleeding. Your nurse or healthcare worker at the hospital can show you how to do this.

As symptoms can progress quickly, it is important to tell your doctor or nurse if you have:

- trouble eating or swallowing
- painful spots or sores in your mouth

• sores on your lips or in your mouth.

Preventative measures (e.g. regular mouth care, close monitoring and early intervention) can help to alleviate this side effect. Self care measures include:

- regular mouth care after eating, smoking and before bed, using a soft toothbrush and non alcohol-based mouthwash
- maintaining adequate fluid intake (aim to drink eight glasses of clear fluids per day, or more, if you can manage it)
- eating soft, minced or pureed foods
- adding extra sauces or gravies to moisten meals
- avoiding foods that are acidic, hot, coarse or hard, and salty or spicy
- consuming small, frequent, high protein, high energy meals
- smoking cessation strategies
- avoiding alcohol

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Diarrhoea

At times you may have very loose or liquid stools (diarrhoea). It is important to seek medical attention if you have uncontrolled or worsening diarrhoea. If left untreated, diarrhoea can result in dehydration, weakness, weight loss, skin soreness and poor nutrition.

You can help yourself by:

- aiming to drink eight glasses of clear fluids per day, or more, if you can manage it (try to avoid fizzy drinks and natural fruit juices)
- avoiding caffeinated drinks and alcohol
- limiting rich, fatty/greasy and spicy foods
- limiting raw vegetables and fruit
- consuming small, frequent, bland, low fibre meals (e.g. bananas, rice, noodles, white bread, skinless chicken or white fish)

- limiting dairy products
- ensuring peri-anal area is kept clean by regularly washing with tepid water and mild soap, and drying gently but thoroughly
- applying barrier cream (e.g. Bepathen® or Sudocrem®) if skin becomes irritated
- washing your hands after using the toilet.

If you are experiencing diarrhoea and have recently been treated with the medication irinotecan (commonly used in colorectal cancer) or ipilimumab (used to treat metastatic melanoma), contact your treating team or go to your nearest emergency department immediately.

Peripheral neuropathy

Some chemotherapy can affect nerve endings. This is called peripheral neuropathy. Certain chemotherapy drugs are more likely to cause this condition, which your treating team will advise you about.

Symptoms of peripheral neuropathy can begin any time after the treatment begins, and can get worse as the treatment continues.

It can cause sensations like tingling, burning, numbness or pins and needles in the hands and/or the feet. You may experience difficulties with your fine motor skills (e.g. buttoning a shirt).

Tell your doctor if you get any of these sensations, so they can be monitored and, if necessary, changes can be made to the dose or the type of drug you receive. If the symptoms become severe and are not treated, the nerves could be damaged permanently. Most of the time, these symptoms will get better after your treatment ends, although it may take some time.

Some practical tips to consider if you develop these symptoms:

 Keep your rooms uncluttered and well lit so you can see where you are going

- If there are rugs on the floor, especially in the bathroom, they should have a non-slip backing.
- Avoid slippery, wet floors, and wipe up liquids immediately.
- Use portable over-the-tub handgrips, or install shower grips.
- Adjust the water temperature to avoid burns, and test your bath or washing water with your elbow rather than your hands.
- Use rubber gloves around the kitchen, as well as pot holders and oven mitts to handle items that are hot or cold.
- Shield your fingers when cutting foods and take care opening jars.
- Wear rubber gloves, and shoes or boots, when working in the garage or garden.
- If affected, avoid driving or operating machinery.
- Wear gloves and warm socks in cold weather.
- Avoid excessive alcohol consumption.

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Fact sheet

Infertility and sex

Some chemotherapy drugs can cause infertility. Your doctor will discuss this with you before you start your treatment and will provide you with more information on preserving your fertility.

Your desire or ability to have sex may be affected by the chemotherapy treatment or its side effects. Loss of libido (sex drive) is not uncommon in both women and men.

This may continue for a while after treatment is finished but usually resolves with time. It may help to discuss any concerns you have with your partner and/or doctor/nurse.

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