

For the Patient: CAP

Other names: BRAVCAP

CAP Capecitabine

Uses:

- BRAVCAP is an oral chemotherapy drug treatment plan, given as therapy for metastatic breast cancer, in the hope of destroying breast cancer cells that have spread to other parts of your body. This treatment may improve your overall survival and help reduce your symptoms.

Treatment Plan:

- Your treatment plan consists of usually 6, sometimes more, chemotherapy cycles (about 5 months, or sometimes more). A cycle length is 3 weeks. At each visit, a new prescription for Capecitabine will be written, provided you are recovered from the last cycle. Capecitabine will be taken as twice per day pills for the first 14 days of each 3 week cycle. For each cycle, you will need to have a blood test and see your oncologist before the treatment. The dose and timing of your chemotherapy may be changed based on your blood counts and/or other side effects.

Instructions:

- Drink reasonable amounts of fluids each day of the treatment cycle (6-8 cups a day). Get in touch with the Cancer clinic if you cannot keep liquids in.
- It is important to take **Capecitabine** exactly as directed by your doctor. You may be given tablets of more than one strength to make the right dose. Make sure you understand the directions. Capecitabine is usually taken twice daily, about 12 hours apart with equal numbers of tablets taken at each dose. Capecitabine tablets should be taken within 30 minutes following the end of a meal (breakfast and dinner) with a glass of water.
- If you **vomit** after taking capecitabine, do not take a second dose. Call your doctor or cancer clinic nurse during office hours for advice. If you **miss a dose** of capecitabine, take it as soon as you can if it is within 6 hours of the missed dose. If it is over 6 hours since the

missed dose, skip the missed dose and go back to the usual dosing time. [Let your doctor know if you have missed a dose.](#)

- Sometimes capecitabine treatment has to be **stopped for a short time** because of side effects. When you **restart** capecitabine treatment, do not make up for the missed doses; instead take as directed by your cancer doctor and finish the treatment on the same day as originally planned. For example, if you stop on day 3 of your 14-day treatment course and then restart, you would still take the last dose on day 14. You may be told to take a different dose and you may have extra tablets left over. Return the extra tablets to the clinic at your next visit. Taking a lower dose does not affect the usefulness of capecitabine.
- Store Capecitabine tablets out of the reach of children, at room temperature, away from heat, light and moisture.
- Check with your doctor or pharmacist before you start taking any new drugs. Other drugs such as Phenytoin (DILANTIN®), Warfarin (COUMADIN®), and Digoxin (LANOXIN®) may interact with BRAVCAP.
- You may drink small amounts of alcohol, as it will not affect the safety or usefulness of your treatment.
- Tell other doctors or dentists that you are being treated with BRAVCAP before you receive any treatment from them.
- If you are still having menstrual periods, BRAVCAP may cause your ovaries to stop working, resulting in menopausal symptoms (such as hot flashes) and infertility. Your periods may stop. **This may be permanent**, especially if you are 40 years of age or older. Even if you have stopped having periods after treatment, if you were fertile prior to chemotherapy, you may be able to conceive a pregnancy. Use birth control (but **not** birth control pills) if you could become pregnant, even if you have stopped menstruating because of chemotherapy. Do not breast feed during treatment. Talk to your doctor if you have questions about fertility and birth control after treatment.

Serious Risks of Treatment:

Unexpected and unlikely side effects can occur with any drug treatment. The ones listed below are particularly relevant to your treatment plan:

During treatment:

- **Infection:** The number of white blood cells that help fight infections will be lowered by the chemotherapy drugs, usually starting after about day 7 of each cycle. Your blood count is expected to return to normal by day 1 of the next cycle, and will be normal after the 5

months of chemotherapy drugs. If your white blood cell count becomes very low you could get a serious infection. **If you have a fever over 38°C or 100°F, call your cancer doctor immediately (24 hours a day) or go immediately to your nearest Hospital Emergency and tell the doctor you are on chemotherapy.**

- **Increased risk of bleeding:** The number of platelets (special blood cells that help your blood to clot normally after injury) may rarely be lowered by the treatment. They are expected to return to normal by day 1 of next cycle. When the platelet count is low you may be more likely to bruise or bleed. Notify your cancer doctor promptly if you develop large or numerous bruises, or unusual bleeding (eg. nosebleed that won't stop, blood in stool, urine, or sputum). Try to avoid using ASA or ibuprofen, if other pain medications could be used, especially if you are not drinking well or are having a lot of diarrhea. Talk to your doctor if you feel you need to use one of these medications while on chemotherapy. For patients receiving Warfarin, a modification of the dose may be required based on blood test results (increased INR due to possible interaction with chemotherapy).
- **Heart problems:** In up to 3% of patients, serious heart problems can occur within a few days of starting Capecitabine. These can rarely be fatal. Problems such as chest pain, heart attack, abnormal heart rhythm, or heart failure can occur. Having a history of heart problems with 5-FU, a related chemotherapy drug, is a risk factor, as is having a history of prior angina (heart pain) or heart attack. Tell your doctor promptly if you experience feelings of heavy pressure or pain in the chest, trouble breathing, significant worsening leg swelling, or marked lightheadedness, within the days after starting Capecitabine. If your symptoms are severe, you may need to call for emergency help.

Common chemotherapy side effects and management:

SIDE EFFECT	MANAGEMENT
<p>Nausea, usually mild and intermittent, can be caused by Capecitabine.</p>	<p>If necessary, oral medications will be prescribed for you to use as needed during your pill treatment with Capecitabine.</p> <ul style="list-style-type: none"> • It is easier to prevent nausea than treat it once it has occurred, so follow directions closely. • Refer to pamphlets on how to deal with nausea and vomiting given to you by your nurse at your centre.
<p>Hair loss. It would be rare to lose all of your hair with Capecitabine chemotherapy. Occasionally, thinning of hair may occur over time.</p>	<p>Refer to the pamphlet <i>For the Patient: Hair loss due to chemotherapy</i>.*</p>
<p>Fatigue, usually mild, is common and may worsen or last longer as the number of chemotherapy cycles increases.</p> <p>Mouth sores may occur a few days after chemotherapy treatment begins each time, and may last days or weeks. Mouth sores can occur on the tongue, gums, and the sides of the mouth or in the throat.</p>	<ul style="list-style-type: none"> • Your energy level will improve with time after treatment is completed. • Try the ideas in <i>Your Bank of Energy Savings: How People with Cancer Can Handle Fatigue</i>.* • Brush your teeth gently after eating and at bedtime with a very soft toothbrush. If your gums bleed, use gauze instead of a brush. Use baking soda instead of toothpaste. • Try baking soda mouth rinses (using 1/2 tsp baking soda in 1 cup warm water) and rinse several times a day. Try ideas in <i>Easy to chew, easy to swallow food ideas</i>*. • Tell your doctor about a sore mouth, as your chemotherapy doses may need to be decreased if mouth sores are severe. Call your doctor if you are having difficulty eating or drinking due to pain.

SIDE EFFECT	MANAGEMENT
<p>Your skin may sunburn easily.</p>	<p>Refer to <i>Your Medication Sun Sensitivity and Sunscreens*</i> or the <i>BC Health Guide</i> for more information.</p> <p>After sun exposure, if you have a severe sunburn or skin reaction such as itching, rash, or swelling, contact your doctor.</p>
<p>Hand-foot skin reaction may occur during capecitabine treatment. The palms of your hands and soles of your feet may tingle, become red, numb, painful, or swollen. Skin may also become dry or itchy. You may not be able to do your normal daily activities if blisters, severe pain or ulcers occur.</p>	<ul style="list-style-type: none"> ▪ Avoid tight-fitting shoes or rubbing pressure to hands and feet, such as that caused by heavy activity. ▪ Avoid tight-fitting jewellery. ▪ Clean hands and feet with lukewarm water and gently pat to dry; avoid hot water. ▪ Apply a sunscreen with an SPF (sun protection factor) of at least 30. ▪ Apply lanolin-containing creams (eg, BAG BALM®, UDDERLY SMOOTH®) to hands and feet, liberally and often. ▪ Tell your cancer doctor at the next visit if you have any signs of hand-foot skin reaction. ▪ Stop taking capecitabine and call your cancer doctor if the skin reaction is painful, as your dose may need to be changed. Taking a lower dose does not affect the usefulness of capecitabine.

SIDE EFFECT	MANAGEMENT
<p>Diarrhea may occur between treatments.</p>	<p>To help diarrhea:</p> <ul style="list-style-type: none"> • Drink plenty of liquids. • Eat and drink often in small amounts. • Avoid high fiber foods as outlined in <i>Food Ideas to Help with Diarrhea During Chemotherapy</i>. • Note: If lactose in milk usually gives you diarrhea, the lactose in the tablet may be causing your diarrhea. Take LACTAID® tablets just before your Capecitabine dose. • Stop taking Capecitabine and call your cancer doctor if you have four stools a day more than usual or diarrhea during the night, as your dose may need to be changed.

*available through your nurse or nutritionist

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 _____